UNIVERSITY OF KWAZULU-NATAL
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THE EXCLUSION OF CHILDREN WITH VISUAL IMPAIRMENT FROM EARLY CHILDHOOD DEVELOPMENT PROVISIONING IN KWAZULU-NATAL

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By

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ABSTRACT

There is global recognition of the significance of Early Childhood Development (ECD). South Africa's commitment to ECD was evident in 2004 when the Office of the Premier declared ECD a national priority and directed municipalities to include ECD planning in their Integrated Development Plans. In 2005, the government published the National Integrated Plan (NIP) for ECD in South Africa: 2005 - 2010, further demonstrating the government's commitment toward providing a solid foundation for the holistic development of children.

The researcher noted however that despite these policy developments, there was still a gap in direct ECD services for children with visual impairments. The aim of this research study therefore was to determine the level of exclusion in the provisioning of ECD services for children with visual impairment by exploring the experiences of parents, service providers and foundation phase educators at special schools regarding ECD provisioning in KZN.

The research was conducted using qualitative methodologies. Descriptive, thematic data was gathered through focus group discussions with Social Workers and semi-structured interviews with parents of children with visual impairment and foundation phase educators at schools for the blind. The findings yielded four central themes: insufficient information and support, service unavailability, inadequate specialist training and limited resources. These themes revealed that, despite ECD being declared a national priority, the exclusion of children with visual impairment from the government's ECD provisioning was evident.

The recommendations from this study primarily addressed the government revisiting its structures and policies to ensure the inclusion of children with visual impairment in ECD programmes and secondly to NGO service providers to promote awareness of available resources and support for parents of visually impaired children.
Further research is necessary to expand on the findings of this study to include all provinces of South Africa, and develop, implement and evaluate the ECD protocol for children with visual impairment.

DEFINITION OF TERMS

Barriers to inclusion: obstacles preventing one from achieving what you have set out to do (Oliver, 1996)

Disability: the social disadvantage or discrimination related to an impairment (Stone, 1999)

Impairment: an individual's condition that is either physical, sensory, intellectual or behavioural (Stone, 1999)

Blind: total loss of eye-sight (DPSA, 2000)

Low vision: moderate and severe visual impairment as defined by International Classification of Diseases – 10 (World Health Organisation - WHO, 2011)

Visual impairment: low vision taken together with blindness (World Health Organisation - WHO, 2011).

Emotional disability: a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- An inability to learn that cannot be explained by intellectual, sensory, or health factors.
- An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
- Inappropriate types of behavior or feelings under normal circumstances.
- A general pervasive mood of unhappiness or depression.
- A tendency to develop physical symptoms or fears associated with personal or school problems. – (IDEA, 2004)

ACRONYMS AND ABBREVIATIONS

ABS: Arthur Blaxall School for the Blind

AOP: Anti-Oppressive Practice

DBE: Department of Basic Education

DOH: The National Department of Health

DSD: Department of Social Development

DWCPD: Department of Women, Children and People with Disabilities

ECD: Early Childhood Development

INDS: Integrated National Disability Strategy

KZN: KwaZulu-Natal

KZNBDS: KwaZulu-Natal Blind and Deaf Society

KZNSB: KwaZulu-Natal Society for the Blind

NGO: Non-Governmental Organisation

NIP: National Integrated Plan

OECD: Organisation for Economic Co-operation and Development

O&M: Orientation and Mobility

OSDP: Office of the Status of Disabled Persons

SANCB: South African National Council for the Blind

UN: United Nations

UNCRPD: United Nations Convention on the Rights of Persons with Disabilities

UNESCO: United Nations Educational, Scientific & Cultural Organization

UNICEF: United Nations Children's Fund

WHO: World Health Organization

ZPD: Zone of proximal development

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Chapter One

1.1. Contextualizing the study

This chapter provides the context for this study, introducing perspectives on Early Childhood Development (ECD) and the developmental milestones of children with visual impairment. The chapter argues that whilst research demonstrates the importance of ECD programmes, the provisioning of ECD services for children with visual impairment is inadequate to meet their needs in South Africa.

The background to the study outlines both the position of ECD services within legislative services and non-governmental services for people with visual impairment in South Africa. The background is followed by the research objectives, research questions and a brief overview of the theoretical framework that underpins this study. The chapter concludes with the structure of the dissertation.

1.2. Introduction and Rationale for the Study

1.2.1. Disability in South Africa

Disability is at the forefront of agendas globally. The Conventions on the Rights of the Child, (Article 23), (Unicef, 1989) as well as the Rights of Persons with Disabilities (UNCRPD, 2006) serve as powerful tools to promote the human rights of children with disabilities. Nationally, the rights of children with disabilities are enshrined in the South African Constitution (1996) specifically via the implementation of the Integrated National Disability Strategy (1997), South Africa being a signatory to the

UNCRPD (2007) and the establishment of the Ministry of Women, Children and Persons with Disabilities (2009).

The data collected in Census 2001 indicates that there were 2 255 982 people with various forms of disability, which comprises 5% of the total population enumerated in this census. Of this number, the prevalence of sight disability was the highest (32%) followed by physical disability (30%), hearing (20%), emotional disability (16%), intellectual disability (12%) and communication disability (7%) (StatsSA, 2005).

The findings of Census 2001 provided useful information on the prevalence of disability in South Africa; one of which was that disabled persons were disadvantaged as far as access to educational and employment opportunities were concerned. It also highlights that the profiles by type of disability, determine the need to have preventive and rehabilitation programmes that target the most affected groups (StatsSA, 2005).

The researcher draws on these findings to illustrate the prevalence of visual disability as being the highest form of disability in South Africa. Despite this, the researcher is of the opinion that the current ECD provisioning for children with visual impairments is not aligned to the finding above that prevalence determines programmes that target the most affected.

1.2.2. Early Childhood Development

Children are stimulated from the moment they are able to open and focus their eyes, responding to visual stimuli: colours, facial recognition and games like peek-a-boo and progressing to reading picture books. Such visual stimulation enables children to identify objects, shapes and numbers, which form the basis for maths skills.

Research demonstrates that the first five years of a child's life is the most critical time for cognitive development, laying the foundation for intelligence and aptitude in adult life (Halfon, Shulman, & Hochstein, 2001; Milteer, Ginsburg, Mulligan, Ameenuddin, Brown, Christakis, & Hogan, 2012; Winter, 2010)

Winter (2010, p. 4) contends that "the first three years is the period of the most rapid growth during which there are specific sensitive periods for optimal learning in particular areas". This demonstrates how crucial the early years are in terms of cognitive development and thereby supporting the need for an enabling learning environment even prior to the statutory school age.

Early Childhood Development (ECD) is defined in the White Paper on Education and Training (DoE, 1995, p. 31) as "an umbrella term which applies to the processes by which children from birth to nine years grow and thrive, physically, mentally, emotionally, morally and socially." This definition clearly recognises the complex nature of children's development as well as that there are a wide range of interrelated factors that impact on early childhood development (Williams & Samuels, 2001).

The researcher recognises that early childhood development is comprehensive or holistic in nature and as such cognitive development cannot be assessed in isolation. This study explores the availability of ECD programmes or centres for children with visual impairment, whilst recognising the network of significant role-players that contribute to the holistic development.

1.2.3. Children with Visual Impairment

By the time sighted children reach the age of three, parents are exploring early childhood development programmes: playgroups, nursery schools and stimulation centres to further enhance their development in a structured forum. Children with visual impairment would also require an enabling environment to promote their cognitive development. This environment is crucial especially since research shows that, with the absence of sight there is a delay in reaching their developmental milestones (Levtzion-Korach, Tennenbaum, Schnitzer, & Ornoy, 2000).

The researcher draws on Willoughby (1985), a well-known author and teacher of blind children, whose work although dated, very aptly captures how blind children learn. Willoughby maintains that a blind child is able to learn the same things as any other child; however he/she may need to be taught differently.

Children learn patterns of behaviour – attitudes, body positions - through imitation. Some of these, like speech are non-visual and will not be any different for the blind child. However for some behaviour, e.g. hand coordination, one would need to arrange an alternative to visual imitation (Hodges, 2004; Shepherd, 2001; Willoughby, 1985).

The sighted child is able to learn how to use cutlery through visual observation, watching an adult during meal times. Soon the sighted child tries to imitate the adult and in order to correct a particular action, he or she can look around and see how the others are doing it, and adapt accordingly. The absence of sight means that the child with visual impairment cannot benefit from such visual cues, which could hinder the learning process.

Some schools of thought have stopped at this point, and concluded, incorrectly that the blind child will do poorly on such things as table manners as he cannot see what others do (Hodges, 2004; Willoughby, 1985). Both Hodges and Willoughby however maintain that it is important to provide a way for blind children to learn: help them to observe through touch, e.g. as a parent feeds their child, he/she can guide the child's hand during the process allowing him to examine how it is held in the hand, how it enters his mouth, etc. With this approach, through a series of gradual steps the child begins to feed himself.

Many situations are similar to the above, in that the child can easily be helped to observe (tactually) others performing a task, and then can be helped to practice it himself. However, this would require a substantial amount of planning and time to facilitate such learning.

Access to ECD programmes during these foundation stages would significantly enhance a blind or partially sighted child's development, hence the research focus was designed to explore through the experiences of service providers, parents and educators of blind and partially sighted children, whether this need is adequately catered for in KwaZulu-Natal, South Africa.

Direct work experience in the disability sector, spanning a period of 14 years, provided the researcher with anecdotal evidence of the limited resources in KwaZulu-Natal that address the early childhood development needs of children with visual impairment.

This motivated the researcher to determine the availability of ECD services for children with visual impairment through exploring the experiences of key role-players – parents, social work agencies and foundation phase teachers.

Having established the significance of the foundation years, this study is aimed at determining the availability and accessibility of Early Childhood

Development programmes in SA for children with visual impairment through exploring the experiences of three sets of participants: service providers, parents and teachers of children with visual impairments.

1.3. Background

1.3.1. Early Childhood Development in SA

In 1994, the concept 'educare' was adopted by South Africa to describe the approach to early child care as the "creation of safe and nurturing environments in which children receive care and educational stimuli in a holistic model which caters for all their physical, developmental, emotional and cognitive needs" (Williams & Samuels, 2001, p. 5).

This South African model, being holistic and integrated in nature required a multi-sectoral collaboration from Governmental Departments of Education, Social Development and Health as well as community-based and non-government organizations. Whilst the National Department of Education was assigned responsibility for 6 to 9 year olds, the Department of Health and the Department of Social Development were given the primary responsibility for 0 - 5 year olds.

Direct ECD services are delivered primarily by the non-profit sector (community-based organizations (CBOs), individual crèches and preschool centres in South Africa, while the Department of Social Development (DSD) and the Department of Basic Education (DBE) provide the main sources of government funding and oversight. However the researcher is of the opinion that this distribution of responsibilities and resources does not adequately meet the demand for ECD programmes in South Africa. Shifting the primary

responsibility for direct services from the Government to NGOs not only undermines its significance, it also impacts standard of service delivery. NGOs require more than partial funding and oversight to be adequately equipped to deliver this crucial service.

This is supported in the evaluation of the national pilot project, where it was reaffirmed that Grade R be made compulsory and it was recommended that Grade R classes be developed at both primary schools and community based sites and that schools should be strongly encouraged to offer Grade R (Williams & Samuels, 2001).

One of the challenges of the ECD Policy Framework was that Department of Education resources were now being directed away from ECD services. Dwindling funding to the NGO sector may eventually impede the sector's ability to meet the ECD needs of South African young children or to contribute meaningfully to ongoing developments. According to Williams and Samuel (2001), there are those who feel that the prioritisation of the Reception Year may be at the expense of the earlier years of development.

A total of 23 482 ECD sites in which 1 030 473 learners are enrolled were appraised as part of a Nationwide Audit of ECD provisioning in SA in 2001. The data suggests that "fewer than one sixth of the 6.4 million children in the 0-7 age cohort in the country are in some form of ECD provisioning" (Williams & Samuels, 2001, p. 5).

Given these gaps in ECD provisioning for children in general, the researcher was motivated to explore, through this study the availability of ECD services that catered for children with visual impairment.

Recent developments reflect global recognition of the significance of ECD. This is also evident on a national level, as demonstrated in 2004 when the Office of the Premier declared ECD a national priority and directed municipalities to include ECD planning in their Integrated Development Plans.

In 2005, the government published the National Integrated Plan (NIP) for ECD in South Africa: 2005 - 2010, where the government's commitment toward providing a solid foundation for the holistic development of children is clearly stipulated (UNICEF, 2005). The researcher however is of the opinion that despite these policy developments, there was still a gap in direct ECD services, even more so for children with visual impairments.

Williams and Samuels (2001) argue that although the need for integrated ECD services is clearly recognized through government policy documents, the policy framework however does not adequately contribute to ensuring access for the poorest 40 percent of South Africa's families to quality ECD. This study hopes to highlight this gap by determining the availability of ECD programmes for children with visual impairments through exploring the experiences of parents, educators and specialized service providers.

1.3.2. Resources for Children with Visual Impairment

The South African National Council for the Blind (SANCB) serves as a National coordinating body of more than a hundred non-governmental organizations for and of the and partially sighted across the nine Provinces.

These member organizations provide essential services to persons with visual impairments (of varying age groups) and their families, including but not limited to the provision of or referral to ECD programmes. Many of these

organizations are well established, some founded as early as 1919 (SANCB, undated).

There are 8 member organizations in KwaZulu-Natal:- 2 Social Work Agencies, 3 Schools, 2 Skills Training Centres and 1 Crafts / Recreational groups. The three Schools are Arthur Blaxall School for the Blind (ABS) in Pietermaritzburg, Ethembeni School in Inchanga and Open Air School in Glenwood.

As mentioned earlier in the chapter, Census 2001 reflects that visual disability was the highest form of disability (32%) in South Africa. Having established the prevalence of visual impairment is the highest form of disability in South Africa, this study is aimed at determining the level of ECD provisioning for children with visual impairments.

Census 2011 reflect that KZN has the highest population (2 240 662) of children between the ages of 0 and 9, while Gauteng is the second highest with 2 096 920 children of this cohort. Despite KZN's leading rank in terms of this population group, only 15 885 attend pre-schools compared to 45 770 in Gauteng (StatsSA, 2012).

These statistics motivated the researcher to undertake this study to address such gaps in terms of ECD provisioning in KZN, with specific reference to children with visual impairments.

The researcher was unable to draw specifically on statistics of children with visual impairment's attendance to ECD programmes or school in Census 2011,

as mainstream school and special school were classified under one category – 'school'.

There has been a significant decrease in the number of children attending pre-school between 2001 and 2011. The primary reason for this decrease is that Grade 0 was integrated into the primary school system. However this does not adequately address the issue of children with visual impairment's accessibility to such resources given that there are only three schools for the Blind and partially sighted in KZN. Data revealed that the total number of visually impaired children currently enrolled at the three schools is 440, a fraction of the actual statistics of the number of Blind persons in KZN.

1.3.3. Value of the Study

The researcher aims to contribute, through this study to the body of knowledge on Early Childhood Development of children with visual impairment within South Africa.

The research is undertaken to influence policy by informing the Government sector of the barriers and challenges that currently exist that hinder equitable inclusion of visually impaired children in ECD services.

1.4. Research Aim

The aim of the study is to explore the ECD provisioning for children with visual impairment in KZN, South Africa.

1.5. Research Objectives

- To identify resources or programmes available in SA for children with visual impairment from three to six years old.

- To understand the experiences / challenges faced by parents of visually impaired children in accessing ECD programmes.
- To determine the views of educators on the availability and accessibility of ECD programmes as they affect school readiness of children with visual impairments.

1.6. Research Questions

- What early childhood development programmes are available in KwaZulu-Natal for children with visual impairment?
- What are the experiences or challenges faced by parents of children with visual impairment in accessing ECD programmes in KZN?
- How do educators view availability and accessibility of ECD programmes for Blind children as they affect school readiness?

1.7. Theoretical Framework

1.7.1. Cognitive Developmental Theory

This research will be guided by Cognitive Developmental theories which propose that the initial perceptions during early years of development form the basis of perceived future experiences. Since sight is one of the first sensations by which an individual encounters the world, then the absence of sight would, theoretically, put that individual at a serious disadvantage for survival and success later in life (Kirkeboen, 1998) as cited in Hupp (2003). The experience of access to ECD programmes would therefore be adequately supported using this theoretical frame.

Hupp (2003) draws on evidence presented by Thompson and Fagan in 1991 that novelty preference during the first year of a child's life reflects future

intelligence quotient (IQ) as well as the development of certain cognitive processes such as memory and attention.

This is further supported by Siegler's rule-assessment approach to cognitive development: any barrier to the encoding of novel stimuli may hinder the developmental process (Hupp, 2003). It would be safe then to assume that the absence of sight would likely interfere with this encoding process. Furthermore, the absence of an enabling learning environment would further hinder the developmental process for children with visual impairment.

This study is therefore designed to explore and glean thick descriptions of the experiences of service providers, teachers and parents of children with visual impairment in respect of early childhood development.

Piaget presents that there are four specific stages in cognitive development, each representing a different type of thinking. Children's transition from one stage to the next is usually quite swift (Piaget, 1953; Wood, Smith & Grossniklaus et al., 2013). However the researcher maintains that for children with visual impairment, there is the potential of significant delay in the transition from one stage to the next, caused by the absence of sight. It is therefore imperative that children with visual impairment receive adequate support during the early years to mitigate this developmental delay.

A crucial aspect of Piaget's theory is that there is definite interaction between a child and the environment, suggesting that a child is unable to learn without such interaction. Piaget further introduced key concepts in addressing how children process information: "schemas" - cognitive structures that represent pre-conceived ideas; "assimilation" - the process of incorporating new information into a pre-existing schema; and "accommodation" – when a child

comes across a new object and first tries to apply to an old schema (Wood et al., 2013).

Piaget theorized that children will explore the environment – through touch, smell, taste and sight; make deliberate, controlled efforts to obtain and sort elements of the outside world as part of their development. Piaget proposed that this method of cognitive development begins immediately after birth and continues throughout the lifespan.

Furthermore, Piaget also reported that there are critical phases throughout childhood that help the child progress to the next stage of cognitive development. Transition from one stage to the next takes place once a child masters the environment at that stage and is able to formulate assimilations at the next stage.

According to Piaget, a child first experiences the world through a sensory-motor process (0 – 2 years) and thereafter advances to the pre-operational stage (2 – 7 years), where the child has both the physical ability and mental capacity to obtain and accommodate information at a surprising rate. The child then progresses onto stage three: Concrete Operational stage (7 – 11years) and finally stage four: Formal Operational stage (11+ years).

Piaget's stages are considered "normal" progression of cognitive development, and therefore any variation from "normal" development would impact cognitive growth. Any physical or mental impairment may prevent a child from fully experiencing the environment and consequently from progressing in their cognitive development. Visual impairment is an obvious variation from normal

sensory input and would likely hinder a child's ability to test the rules of ordinary behaviour and consequently delay cognitive development.

Cognitive Development theory therefore supports the need for and significance of quality ECD programmes for children with visual impairment to mitigate the barriers to transition through the stages of cognitive development.

However whilst Piaget acknowledges that there is interaction between a child and the environment during the development process, he does not place emphasis on teachers or adults in cognitive development process. In contrast, another theorist Lev Vygotsky (Lui, 2012) suggested that irrespective of the interaction between a child and the environment, the child will learn when encouraged to with an adult's assistance. The researcher found both Piaget's and Vygotsky's theories relevant in demonstrating the benefits of the inclusion of children with visual impairment in ECD programmes. The researcher maintains that both the environment that is conducive to learning and the 'adult' - an ECD teacher would enhance the cognitive development.

Vygotsky promotes the role of the More Knowledgeable Other (usually a parent / teacher); zones of proximal development and scaffolding.
A key feature of Vygotsky's theory is Zone of proximal development (ZPD). He maintains that there are two levels of attainment for the ZPD: Level 1 – the 'present level of development' – refers to what the child is capable of doing without any help from others; and Level 2 – the 'potential level of development' – refers to what the child could potentially be capable of with help from other people or 'teachers'. Vygotsky refers to the gap between level 1 and 2 (the present and potential development) as this zone of proximal development.

He believed that through help from other, more knowledgeable people, the child can potentially gain knowledge already held by them (Lui, 2012).
However, the knowledge must be appropriate for the child's level of comprehension. When a child does attain his / her potential, this shift occurs and the child can continue learning more complex, higher level material. The researcher draws on Vygotsky's development theory to support this study in that it recognizes the role of the significant other in the cognitive development process of children in general.

The premise of this study is that the cognitive development of children with visual impairments would be further enhanced with the appropriate learning environment like an ECD centre with adult facilitators / teachers.

1.7.2. Anti-Oppressive Practice

A further theory frame has also been deemed significant for this study. Whilst Cognitive Theories provide the framework for the importance of ECD, Anti-Oppressive Practices would be used to critically explore access to resources by vulnerable groups. Anti-Oppressive Practice is described in Adams, Dominelli and Payne (2002) as a "dynamic process based on the changing complex patterns of social relations" (p. 132).

A leading theorist, Lena Dominelli (2002, p. 8) defines oppression as "relations that divide people into dominant or superior groups and subordinate or inferior ones. These relations of domination consist of the systematic devaluing of the attributes and contributions of those deemed inferior and their exclusion from the social resources available to those in the dominant group". Exclusion, which ultimately results from oppression, forms the significant foundation of this

study in that children with visual impairment are excluded from resources, e.g. ECD provisioning.

Dominelli (2002) further maintains that oppressive relationships become evident when strategic leadership do not allow for the accommodation of certain social groups e.g. race, gender, class, disability and sexual orientation, when allocating power and resources. This unequal division creates a sense of exclusion to resources, which is a key motivation for this present study. This study is designed to explore how the specific early developmental needs of children with visual impairment are accommodated in terms of ECD provisioning in South Africa. The researcher therefore maintains that failure to accommodate the ECD needs of visually impaired children results in exclusion which is tantamount to oppressive relationship.

The act of challenging inequalities is the driving force of Anti-Oppressive Practices. In using the Anti-Oppressive Framework, the study explores the access and availability of ECD services for children with visual impairment, thereby determining the level of exclusion.

It is further maintained (Adams et al., 2002) that if Anti-Oppressive Practice is to provide appropriate and sensitive services that are needs-led rather than resource-driven, it has to embody:

"A person centred philosophy; and egalitarian value system concerned with reducing the deleterious effects of structural inequalities upon people's lives; a methodology focussing on both process and outcome; and a way of structuring relationships between individuals that aims to empower users by reducing negative effects of social hierarchies on their interaction and the work they do together." (p. 134)

The researcher uses Dominelli's position on appropriate and sensitive services to explore the availability of ECD services for children with visual impairments in South Africa.

The researcher, like Subrayen (2011) recognises that attitudes of power and power relations are usually evident when one responds to the needs of people with disabilities (Subrayen, 2011).

Subrayen further maintains that as a result of these power relations, people with disabilities experienced exclusion from social, educational, political and economic resources, resulting in being seen as voiceless and powerless (Subrayen, 2011). Subrayen aptly positioned social exclusion, 'othering', and voiceless-ness as exclusionary processes, which the researcher found pertinent in determining to what extent children with visual impairment are included in the ECD provisioning in KZN.

1.8. Research Methodology

This research study was undertaken as a qualitative study with the use of focus groups and interviews as methods of data collection (Gray, 2009). The qualitative component of the research design was exploratory-descriptive in that it allowed the researcher to gain insight into and an understanding of the experiences of service providers, parents and teachers of children with visual impairments in terms of their early childhood development needs.

Exploratory studies involve the use of interviews as one the key data collection methods of this research (Babbie, 2013). Descriptive design further enhances the understanding of these experiences through the provision of qualitative

descriptions (De Vos, Strydom, Fouche, & Delport, 2011), an important focus of this study.

Details about the research methodology used in the study will appear in chapter 3 of this report.

1.9. Structure of Dissertation / Conclusion

The dissertation resumes with Chapter Two in which the literature review is presented in three phases.

The first phase discusses the significance of the first five years of child development; the benefits of ECD programmes, underpinned by the main theorists of Cognitive Development. Phase 2 of the Literature review clearly showcases the Child with Visual Impairment, focusing on definitions, developmental milestones and specifically at how children with visual impairment learn. Finally the review of literature presents the legislative context, exploring both international and national policies, including a National Audit of ECD provisioning (Williams & Samuels, 2001), diagnostic review (Richter, Biersteker, & Desmond, 2012) and situational analyses (Philpot, McLaren, Laryea-Adjei, & Gelders, 2012).

The third chapter describes the methodology used to gather data in order to interrogate the research questions and achieve the study aims. Chapter Four presents the findings of the study done through a thematic analysis of the data gathered. This chapter also includes a discussion, where the researcher used literature to substantiate the findings, and explore the dynamics that may account for the themes and categories identified. Chapter five discusses the main conclusions and recommendations of the research.

Chapter 2
Literature Review

2.1. Introduction

The literature review offers a focussed description of early childhood development and the benefits of ECD programmes through the lenses of Cognitive Development theorists, whilst using Anti-Oppressive Practice an additional framework to critically review the provisioning of ECD services for children with visual impairments in South Africa.

In this literature review, a contextual framework is provided by first highlighting the significance of the early years (0 – 5) in terms of development, aligned to the developmental stages for children, specifically looking at how children with visual impairment learn. Further, the literature aims to emphasise the benefits of Early Childhood Development (ECD) programmes. The final stage of the review will position this research within the disability context and legislative framework in South Africa, as well as review ECD provisions in South Africa with specific reference to resources for children with visual impairment.

2.2. Theoretically situating the study

The researcher used Cognitive Developmental theories to explore the various positions on children's development as the foundational theory to this research. Piaget for instance highlights the interaction between a child and the environment, suggesting that learning does not take place without such interaction (Wood et al., 2013). In contrast, another cognitive development theorist, Lev Vygotsky emphasises the role of the adult as the More Knowledgeable Other as more crucial in the cognitive development process; the

child will learn when encouraged with an adult's assistance (Lui, 2012). Vygotsky promotes the role of the More Knowledgeable Other; providing support for an enabling learning environment such as an ECD programme.

Piaget and his work continue to influence the early childhood field, largely characterised by concepts of developmentally appropriate practice (Dockett, Perry, Campbell, & Hard, 2007). Piaget maintains that children obtain and sort elements as they explore their environment, a process which begins immediately after birth and continues throughout the lifespan, a premise that is aligned to this current research, in that the early years are a critical period for cognitive development. Whilst Piaget presented the stages of development, as detailed in Chapter one, it can be concluded that any variation from the normal progression, as in the case of visual loss, would impede cognitive development. Hence this substantiates the need for additional support for children with visual impairment during the foundation years.

Having demonstrated the importance of the early years and the benefits of ECD programmes, the researcher used Anti-Oppressive Practice (AOP) to critically review the provisioning of ECD programmes by the South African government for children with visual impairment.

Dominelli (2002) maintains that oppressive relationships become evident when strategic leadership does not allow for the accommodation of certain social groups e.g. race, gender, class, disability and sexual orientation, when allocating power and resources. This unequal division creates a sense of exclusion to resources, which is a key motivation for this present study. There is evidence in recent policies and legislation that early childhood development has become a national priority. However the researcher maintains that, in line with Dominelli

(2002), the non-allocation of resources to meet the ECD needs of children with visual impairments is tantamount to oppressive practice.

This study is designed to explore the ECD provisioning for children with visual impairment in South Africa. The researcher believes that AOP is relevant to this study in that despite the South African Government recognising the significance of foundation years through its policies and legislation, there are limited provisions and resources made for children with visual impairments. This view is supported by a review by Richter et al., (2012) who identified the gaps between policy and practice and inequity as the two major problems with the current ECD paradigm.

2.3. Early Childhood Development

2.3.1. The First Five Years

Researchers have established that the first five years is a time of unparalleled change for cognitive development (Halfon et al., 2001; Illig, 1998). This is further supported by literature and research that suggests that 90% of the brain is established by the time a child turns three as outlined in chapter one (Winter, 2010).

Winter reports that a child's first 'sense of self' is conceived within the first two years, by which time most children are able to differentiate between themselves and others. This is crucial for the child's ability to determine how they should function in relation to other people. The researcher found these studies relevant in demonstrating the need for early intervention, particularly for children with visual impairment. The researcher maintains that children with visual

impairment do not benefit from incidental learning based on visual cues and would therefore require additional support in conceiving the first 'sense of self'.

Studies by Shonkoff and Phillips in 2000 and McCain, Mustard and Shanker in 2007 further support the significance of the early years in terms of brain development (McCain, Mustard, & Shanker, 2007; Shonkoff & Phillips (Eds), 2000).

Earl draws on various studies (Blank, Rose & Berlin, 1978; Feagons, 1985; Tough, 1977; Rossetti, 2001; Herbert-Myers, Guttentag, Swank, Smith & Landry, 2006) to demonstrate the link between good early language skills and good cognitive development and further maintains the importance of early communication development (Earl, 2011).

This view was supported in the research by Locke, Ginsborg and Peers (2002) who found that the foundation levels of communication development are closely related to the subsequent development of literacy skills. The researcher is of the opinion that these research findings are relevant to the current study in that development of language is an integral component of early childhood development. The researcher further recognises that language development is largely dependent on visual stimulation. Any deviation, as in the case of visual impairment, would require planned intervention to mitigate this disadvantage.

Earl (2011) elaborates that during the first year of life; the child learns to understand sounds as having meaning, while during the second year the child learns that meaning can be attached to symbols/pictures. The researcher believes that while these studies support the significance of the early years for

development, reference is limited to visual stimulation for the development of language, contrasting with the core foundation of this study.

Earl (2011, p. 14) draws on studies by Rossetti (2001) to demonstrate that early communication skills "provide the maximum predictive relationship with later intelligence attainment and school performance". Literacy skills are closely linked to our thought processes, ability to access information and interpret the world around us, and to our employment potential (Locke et al., 2002). The researcher found these studies relevant in demonstrating the significant value of early childhood intervention in circumstances where a language delay may be prevented through timely intervention.

Studies that explore the developmental milestones of children provide the researcher with a foundation of understanding how children with visual impairment learn and develop.

According to Jean Piaget (Milteer et al., 2012), children learn through play. Ginsburg (2007) concurs that children learn more efficiently and gain more knowledge through play-based activities. The researcher proposes that such "play" and learning is largely based on visual stimuli, which then prompts the question of how adequately children with visual impairment are stimulated during the foundation stage.

The absence of sight inevitably limits the way children engage in play and physical activities. Such limitations result in delays in their gross motor development and mobility skills, consequently restricting further opportunities to participate in other physical activities (Lieberman, Houston-Wilson & Kozub, 2002).

The significance of play-based activity and learning for visually impaired children is supported by Kef & Deković (2004) as cited in Bam (2012) who found that "visually impaired children who are inactive during their childhood are more likely to experience diminished daily life and social activities" (p. 29). The researcher found this relevant to this research study because an ECD programme would provide the visually impaired child with an environment that promotes activity, thereby alleviating diminished daily life.

Families explore a range of services, as well as information and support to promote the healthy development of their children. Additionally, families of children with visual impairment need specialized services to mitigate risk factors or address problems that young children may experience.

2.3.2. Benefits of ECD programmes

The researcher draws the attention of the reader to the critical analysis of major current theoretical perspectives on early childhood education, which reflects the social, political and economic contexts of various countries, communities and organizations. As part of this analysis, Dockett et al. (2007) highlighted the various expectations of early childhood education as documented by earlier researchers.

The researcher found the following perspectives relevant to this current study:

- "a context for children to engage with and explore their worlds, without pressure to engage in formal learning or instruction - Cuban, 1992; Seefeldt & Wasik, 2002" (Dockett,et al., 2007, p. 51).

This is relevant to the current study as the suggestion is that such a context would enable a child with visual impairments to engage and explore in a safe environment, thereby enhancing the learning process.

- "an economic imperative seen to be contributing to the future benefit of society by producing a competitive workforce - Dahlberg & Moss, 2005" (Dockett et al., 2007, p. 51).

The relationship between early childhood education and employment as demonstrated in the statement above is especially relevant to those with visual impairment in terms of promoting employment equity.

- "an investment linked to future savings in terms of special education and rehabilitation services - Cleveland & Krashinsky, 2003; Dickens et al., 2006; Ludwig & Sawhill, 2006; Schweinhart et al., 2005" (Dockett et al., 2007, p. 51), and

- "a site for preparing children for later stages of education - Bertram & Pascal, 2002; Moss & Petrie, 2002" (Dockett et al., 2007, p.51).

Both statements above are aligned to the premise of this research that participation in ECD programmes would place children with visual impairments at an advantage and serve to mitigate the impact of visual impairment.

Research demonstrates that ECD programmes benefit children, families, and communities (Milteer et al., 2012). Longitudinal studies of child development programmes conducted in the United States have provided considerable data supporting the positive impact of ECD programmes. Although studies

conducted by Ensminger and Slusarcick (1992) and Currie and Thomas (1998) are dated, the researcher believes they are worth mentioning as they established that academic performance in the early grades is a significant predictor of eventual high school completion.

Therefore, if an ECD programme can improve performance in the early grades, it is highly likely to increase the probability of high school graduation with intended improvements in future earnings and employment opportunities. Educators can offer valuable information in identifying how ECD access is experienced and with what consequences; this is an additional focus of the current study.

Research conducted within South Africa further supports the value of ECD, whilst providing a contextual framework for this study (Aubrey & Dahl, 2008; Biersteker, 2010; Ebrahim, Killian, & Rule, 2011).

Research has demonstrated that the potential for developmental delays, specifically language can be anticipated to a certain degree and can possibly be reduced or even prevented through early intervention (Rossetti, 2001; Stanton-Chapman, Chapman, Kaiser, & Hancock, 2004).

Research into early language development indicates that many of the signs for language development are formed within the first year of a child's life when they are in fact non-verbal (Rossetti, 2001).

The researcher found these studies to be relevant to the current study based on the position that the first years of life is a crucial time for development as well as the value of early intervention.

2.4. Disability: Visual Impairment

2.4.1. The individual and social models of disability

The World Health Organization (WHO), the United Nations' public health arm, published its new framework for disability and health in 2001 called the International Classification of Functioning, Disability and Health, which linked disability to when health ends. WHO's 2001 definition of disability achieved the following: established parity between 'mental' and 'physical' reasons for disability, mainstreamed the experience of disability and recognized it as a universal human experience, and called for the identification of 'facilitators' that not only eliminate barriers but enhance experience and performance (World Health Organization, 2007).

This framework is relevant to the current study in that an ECD programme for children with visual impairment would provide the facilitators that help to eliminate barriers.

The models of disability also have significance on how one responds to disability issues – the individual model of Disability has two main aspects, firstly the location of the 'problem' of disability within the individual and secondly the view that the causes of the problems stem from the functional limitations or psychological losses that are assumed to arise from the disability (Oliver, 1996).

In contrast, the social model locates the problem within society and society's failure to meet the needs of people with impairments (Stone, 1999). The researcher is of the opinion that the latter would be more conducive for relevant

stakeholders to take responsibility for adequately meeting the ECD needs of children with visual impairment.

The significance of perspectives on disability was also highlighted more recently by Storbeck and Moodley (2011) who maintain that when disability is viewed from a medical and welfare framework, the focus is primarily on correcting the disability medically or through therapy rather than on the social needs of people with disabilities. They further suggest that this may offer an explanation for the fact that whilst the Integrated National ECD plan recognises the value of immunization, prevention of illnesses as well as of family and community involvement in early childhood development; it fails to acknowledge early identification and intervention for children with disabilities (Storbeck & Moodley, 2011).

Storbeck and Moodley (2011) further suggest that this lack of provision for children with disabilities and the limited liaison between government departments with regard to implementing the National Integrated ECD Plan is indicated by a lack of focus on ECD in the policy statement on Strategic Priorities for the National Health System (2004-2009).

The focus of the Strategic Priorities for the National Health System remains on children aged 5+, youth and adolescents and the reduction of childhood infectious diseases, rather than the detection and management of disabilities during early childhood and subsequently, the provision of ECD services. This however is not aligned to the Department of Welfare's - known today as Department of Social Development - (1997) commitment to the provision of ECD services that focuses on prevention and the maintenance of good health (Storbeck & Moodley, 2011).

Biersteker (2012) discussing disability in the South African context, proposes that the definition of disability in the 2009 and 2010 General Household Survey is unsuitable for children 0-4 years. The definition relies on difficulties, amongst others, in walking a kilometre or climbing a flight of steps, remembering and concentrating, and self-care such as washing or dressing. The researcher agrees with Biersteker (2012) that all young children would naturally experience difficulties in these areas due to their developmental stage, hence influencing statistical data on disabilities in children.

It is imperative that disabilities in children must be recognised and that children and families are referred for assistance as early as possible. The greatest prospect for reducing and remediating the effects of the particular disability results from support and interventions provided as early as possible (Richter, et al., 2012). For this reason, the researcher believes that ECD services are critical for supporting children with disabilities and their families, as proposed through the current research.

The researcher however maintains that early intervention is only made possible if effective systems for early identification are in place. Philpot et al. (2012) report that a formal evaluation was conducted in 2003 which revealed that "almost one in four facilities did not deliver any developmental screening; only one in nine facilities conducted screening according to protocol; and no register of children identified as being at risk was kept" (p. 85).

The researcher believes that this limitation in screenings and early identification contributes to lack of referrals for early intervention for children with visual impairment.

2.4.2. Visual Impairment

According to the Census 2001, visual impairment remains the most prevalent disability within South Africa, recorded at 32% of the total disabled population (StatsSA, 2005). Furthermore, the South African Department of Health's National Guideline on the Prevention of Blindness estimated the prevalence of childhood blindness to be 0.47 per 1000 (StatsSA, 2005).

Despite this prevalence, research into areas of visual impairment remains limited. Rowland (2008) maintains that whilst inclusion into the general category of disability is useful at times for promoting the interests of disabled citizens, it unfortunately lends to obscurity in respect of essential differences and needs of visually impaired persons when being analyzed. The researcher agrees with the above statement as limited statistics relating specifically to visual impairment inadvertently limits the assessment of resources available.

Hupp (2003) found it essential in his study to determine the differences between sighted individuals and those with visual impairment in order to explore the cognitive developmental needs of children with visual impairment. Hupp (2003) maintains that since all people need to think and perform within the same environment, then basic elements of cognition and mobility are primary tenets of survival. Much research has already been performed in respect of mobility issues for the visually impaired, but very little is known about cognitive differences between the two groups.

The researcher therefore recognises this as a significant gap in research as studies of this nature would inform decisions regarding resources and support required to meet the cognitive developmental needs of children with visual impairment.

2.4.3. The Child with Visual Impairment

A well-known author, teacher of blind children and a mother who has raised three blind children to successful adulthood says,

> *"Expect the blind child to learn the same things as any other child, but realize that he may need to be taught differently."*
> (Willoughby, 1985)

This quote aptly summarizes that visual loss, of any extent will have an impact on a child's ability to perceive, explore, and understand the world and thereby affect his or her learning. However researcher agrees with Willoughby that it is imperative that the child with visual impairments is encouraged through play and stimulating experiences to explore the environment to facilitate his learning, growth and development.

Children with visual impairment learn by touching, listening, smelling, tasting, moving. The initial teaching takes place through talking, touching, and playing during natural interaction times between parent and child. Children with visual impairment benefit from playing with toys and objects that vary in texture, weight, smell, sound, and colour in an environment that promotes the sensory experiences. It is crucial to provide children with visual impairment with direct information about their environment and its objects, which in turn, leads to the introduction of new concepts and language.

Literature demonstrates that visual impairment at birth or during early childhood interferes with early psycho-motor development of the child, which in turn is essential for cognitive and social development (Levtzion-Korach et al., 2000)

This supports the need for early identification and intervention for children with visual impairment, which is the premise of this research. This position is further supported by scholarly work that found parent-child interventions to be inadequate without appropriate support and education, which the researcher believes can be through ECD programmes. Furthermore delayed identification of visual impairment and management thereof will further impede the child's ability to adapt to family and community life, impacting on the learning process.

Children begin to attach names or words to things as they see their parents using familiar objects, and this process encourages their language development. Children who are blind or visually impaired however may not name or even move toward a nearby object until they know it's there. Sharing information with a child who is blind or visually impaired about the things and people in his environment enables the child to develop his language skills (cognitive development) as well as his motivation to crawl or walk (gross motor development).

Children who are visually impaired unfortunately miss out on incidental learning since a significant percentage of early learning comes through visual experiences, as children watch people around them and imitate their actions (Willoughby, 1985). The researcher concurs with Willoughby (1985) that it is essential that children with visual impairments receive additional help and attention to overcome this gap in the learning process, which is the basis of this research.

Gray (2009) established that even though development occurs at similar rates, visually impaired children have their own set of norms which deviate from developmental sequences already established. This point lends support for the

need for an early learning environment that meets the specific needs of children with visual impairment.

2.4.4. The Impact of Visual Disability on Child Development

Severe visual impairment presents a major obstruction to the 'normal' learning process (Weinstein, 2005). Children learn by integrating external objects, usually perceived through visual stimuli, into their other senses of touch, smell, taste and hearing. The obstruction to 'normal' learning process caused by the absence of sight must be overcome through purposeful intervention by parents and significant others. The purpose of this current study therefore was to investigate what 'purposeful interventions' are in place to overcome this obstruction.

The researcher believes, given that it has been established that the absence of sight causes delay in motor, social and cognitive development, a child with visual impairments would benefit from early purposeful intervention (ECD services) to mitigate this delay.

2.4.5. Visual impairment and barriers to inclusion in ECD

White Paper 6: Building an Inclusive Education and Training System which was launched in South Africa in 2001 was a radical departure from the traditional model of special education provision.

Statistics indicate that a large percentage of visually impaired learners are not attending school (Sukhraj-Ely, 2008). The South African National Council for the Blind (SANCB) as described in Chapter One lists 21 special schools in South Africa on their member organisations register, which cater for about +/- 3000 visually impaired learners. These schools are scattered across South Africa

– 2 in Western Cape, 3 in Eastern Cape, 1 in Northern Cape, 2 in Free State, 3 in KZN, 3 in Gauteng, 5 in Limpopo and 1 in Mpumalanga.

The special schools for children with visual impairment affiliated to South African National Council for the Blind (SANCB, 2011/13) are listed hereunder:

Eastern Cape

Efata School for the Blind and Deaf
Khanyisa School for the Blind
Zamokuhle Senior Secondary School

Free State

Bartimea School for the Blind and Deaf
Thiboloha School for the Blind and Deaf

Gauteng

Children's Disability Centre (ECD Centre)
Prinshof School
Sibonile School

KwaZulu-Natal

Arthur Blaxall School for the Blind
Ethembeni School
Open Air School

Limpopo

Bosele School for the Deaf and Blind
Letaba School for the Handicapped
Setotolwane LSEN School

Siloë School

Tshilidzini Special School

Mpumalanga

Silindokuhle School for the Blind

North West

Christiana School for the Blind

Northern Cape

Re-Tlamaleng School for the Blind

Western Cape

Athlone School for the Blind

Pioneer School for the Blind

In comparison, Census (2001) reflect that there are 116 437 children with visual impairment between the ages 0 to 19 in South Africa. Sukhraj-Ely (2008) deduces from these statistics that the rest of the visually impaired learner population cannot be catered for in special schools. The researcher draws on Sukraj-Ely's findings to question that if the existing resources are failing to meet the demands of primary and secondary education for children with visual impairment, how then are the ECD needs being met?

2.5. Legislative Context

2.5.1. International Legislation and Policies

Sukhraj-Ely (2008) positions the shift in focus to "human rights, social welfare, and acceptance of the moral obligation to help weaker sectors of the society" as

aligned to 20th century industrialisation and subsequent economic growth and prosperity in the world (p. 42).

Disability rights and children's rights are both firmly situated in International legislation and policies – the United Nations Conventions on the Rights of Persons with Disabilities (Nations, 2006); Convention on the Rights of the Child (article 23); African Charter of Human and People's Rights (1981; article 18(4)); the African Charter on the Rights and Welfare of the Child (1999; article 13); and European Social Charter (article 15).

Furthermore the right of access to education of children with disabilities is clearly evident from the fact that inclusive educational practices are being endorsed internationally. The UNESCO sponsored 'Education for All' initiative, states that all children, including those with disabilities and other special needs, are entitled to equity of educational opportunity.

Sukraj-Ely (2008) however highlights that inclusivists concede that it is more important for the disabled learner to have actual access to education rather than merely the right to education. Similarly the researcher hopes to explore through this study; that despite South Africa's commitment to such progressive international legislation and policies, children with visual impairment in South Africa have limited access to education, especially Early Childhood Education.

2.5.2. Socio-political perspectives of early childhood education

Focus on early childhood education has increased significantly across the world during the past decades. For example, the Organisation for Economic Cooperation and Development report (OECD, 2001) indicated that all member countries had committed to a national focus on early childhood education

(Dockett et al., 2007). The social, political and economic contexts of particular countries, communities and organisations impact on the nature of early childhood education provided and the nature of experiences regarded as important for young children.

According to Heckman and Masterov (2007) early childhood education is a component of an economic imperative in some contexts; seen to be contributing to the future benefit of society by producing a competitive workforce. McCain et al.(2007, p. 17) also maintain that "the roots of economic productivity and health risks in adulthood are found in early childhood".

The researcher found this position relevant to the current study in that it provides the premise that ECD for children with visual impairment would enhance employability in later years, thereby promoting equal opportunities for persons with disabilities.

Further, parental employment is regarded as an effective means of alleviating poverty and deprivation within families and communities, so again is a service that promotes the common good of societies (Ball & Vincent, 2005). The researcher believes that this additional benefit of ECD outlined by Ball and Vincent (2005) is particularly relevant to parents of children with disabilities, who unfortunately suffer the loss of income due to the absence of suitable ECD programmes, thereby compounding the impact of disability on the family.

2.5.3. National Legislation and Policies

South African policies, papers and plans reflect the government's comprehensive approach to ECD, as demonstrated by South Africa signing the

African Charter on the Rights and Welfare of the Child, the Convention on the Rights of the Child, Education for All and the Millennium Development Goals. Additionally, children's rights are protected by the South African Constitution and various Acts and policies. The significance of ECD, as mentioned in Chapter One was further demonstrated in 2004 when the Office of the Premier declared ECD a national priority and directed municipalities to include ECD planning in their Integrated Development Plans. Consequently the government published the National Integrated Plan (NIP) for ECD in South Africa in 2005. However, despite these progressive legislations, a holistic and comprehensive approach to early childhood development is yet to be achieved (Richter et al., 2012).

One of the gaps identified by Richter et al. (2012) is that whilst the Children's Act forces the Minister of Social Development to develop a comprehensive national strategy aimed at securing a properly resourced, coordinated and managed early childhood development system, giving due consideration to children with disabilities and chronic illnesses, the Act does not obligate government - national, provincial or local - to fund or ensure the provision of ECD services. The Act instead only affords the MEC for social development the discretionary power to provide and fund ECD services (Section 93.1). The researcher is of the opinion that this loophole has resulted in the limited or lack of ECD programmes for children with visual impairment.

The researcher agrees with Richter et al. (2012) in their criticism of the ECD plan because of the inherent exclusion of the most vulnerable children in poverty and those with disabilities. In order to remedy this oversight, it is necessary for the revised NIP to articulate a clear and enforceable obligation on national, provincial and local governments. This would require the government

to provide and fund ECD services, rather only subsidising and regulating (Richter et al., 2012).

Richter et al. (2012) maintain that there is lack of agreement between the different government departments as to the age of children that fall within the ECD framework in South Africa. The researcher believes that the lack of consistency in the definition of ECD influences the planning, implementation and funding of ECD services.

2.5.4. National Audit / Review of ECD

The significance of the early years and the benefits of ECD programmes are supported via policy and legislation: Constitution of SA (1996), the Integrated National Disability Strategy (1997), United Nations Convention on the Rights of Persons with Disabilities (2007) – all promoting equal access, full participation and fundamental human rights for all, including children with disabilities. Subrayen (2011, p. 94) however found "limited adherence or attention to legislations pertaining to disability, intolerance, human rights and social justice issues".

In the South African context, legislation and policies do not always translate into a meaningful environment that addresses full and equal participation, access and inclusion at all levels which is the basic tenet of the Anti-Oppressive Practices (Dominelli, 2002).

Researchers have demonstrated that despite legislation and policies in South Africa, physical resources and infrastructure do not always promote inclusion for persons with visual impairment (Sukraj-Ely, 2008) or alleviate blind persons being marginalised (Subrayen, 2011).

Sukraj-Ely (2008) critically analyzes "inclusive education" in South Africa and the specific challenges faced by children with visual impairments. In the researcher's opinion, this study however does not sufficiently explore inclusive education at ECD level.

A Nationwide Audit of ECD provisioning in SA, conducted by Williams and Samuels (2001) provides a situational analysis of services within South Africa. This research aims to extend this survey, by exploring access issues around ECD provisioning for Children with Visual impairment.

Storbeck and Moodley (2011) also provided a critical review of ECD policies in South Africa, highlighting certain gaps: firstly the absence of an indication of how these policies will be implemented and where the funds will come from and secondly the lack of focus on children with disabilities. The researcher agrees with Storbeck and Moodley's suggestion that this lack of focus on children with disabilities could be linked to the lack of consensus regarding disability from the different sectors and the limited statistical data on disability in children.

A more recent situational analysis of children with disabilities in South Africa and the gaps in service was undertaken by Department of Social Development (DSD), Department of Women, Children and People with Disabilities (DWCPD) and UNICEF in 2012. One of the factors that contribute to the gap in services for children with disabilities is the lack of intradepartmental collaboration.

Research also suggests that there is a tendency to work in silos resulting in a lack of intra-departmental collaboration. Philpot et al. (2012) report that non

integration of services was identified by stakeholders in the health sector as a challenge. They further maintain that despite Department of Health having many directorates and sub-directorates that impact on the health of children, "there is no co-ordinated and coherent response to the requirements of children with disabilities." (p. 83).

Based on anecdotal experience, the researcher concurs with Philpot et al. (2012) in that the lack of collaboration between governmental departments contributes to the absence of collaboration regarding service delivery for children with disabilities, in this case ECD provisioning for children with visual impairments.

The researcher recognises that other than non-collaboration there are various other factors – funding, resources, specialist skills - that contribute to the gaps in service provision for children with disability as evidenced in the recent audits, reviews and analyses (DSD, 2012; Storbeck & Moodley, 2011; Richter et al., 2012; Williams & Samuels, 2001).

2.6. Summary

This literature review highlighted the need for research into the factors that serve as barriers to the inclusion of children with visual impairment in ECD programmes in KZN, South Africa.

Literature clearly supports the significance of the early years and the benefits that ECD programmes can offer children. It is further demonstrated that ECD programmes would have a significant impact on children with visual impairment in promoting their holistic development. ECD programmes would offer visually impaired children an environment to engage with other children and develop basic foundational skills.

Chapter Three
Research Methodology

3.1. Introduction

This chapter presents the research methodology used in the collection of data for this study. It also outlines the rationale behind the particular methodology, the manner in which the research tools were used as well as the nature of the research process. The chapter also sets out the relevant research questions and addresses issues of reliability and trustworthiness pertaining to the study.

3.2. Research Aim and Objectives

The research aim was to determine the level of provisioning of ECD services for children with visual impairment through the experiences of parents, service providers and foundation phase educators at special schools.

In this regard, the key objectives of this research as discussed in Chapter one were:

- To identify resources or programmes available in KZN for children with visual impairment from birth to six years old.
- To understand the experiences / challenges faced by parents of blind children in accessing ECD programmes.
- To determine the views of educators on the availability and accessibility of ECD programmes as they affect school readiness of children with visual impairment.

3.3. Research Design

The researcher opted to undertake this study as a qualitative research as this offers opportunity for differently and uniquely exploring and understanding the

experiences of parents, service providers and foundation phase educators on the inclusion of visually impaired children in ECD programmes. The qualitative nature of this study allowed the researcher the opportunity to adopt various methods of data collection – focus groups and interviews (Gray, 2009) using different sample groups, thereby enhancing triangulation and thus credibility of this study.

The qualitative component of the research design was exploratory-descriptive as it allowed the researcher to gain insight into and an understanding of the experiences of service providers, parents and educators of children with visual impairments in terms of their early childhood development needs. Exploratory studies involve the use of interviews which is one of the key data collection methods of this research (Babbie, 2013).

Descriptive design further enhances the understanding of these experiences through the provision of qualitative descriptions (De Vos et al., 2011), which was an important focus of this study. Both designs were deemed suitable in achieving the aim and objectives of the study.

The study explored the experiences of significant role-players – parents, social workers and educators regarding the exclusion of children with visual impairment in ECD provisioning, while accepting and understanding that individuals are complex. Hence, a qualitative research design was deemed most suitable. Leedy and Ormrod (2005) and Geertz (1973), cited in Cohen, Manion and Morrison (2007) endorse the need for the entire situation pertaining to each participant to be grappled with, resulting in "thick and deep" qualitative research data that can be interpreted comprehensively, taking context and difference into consideration. Selecting a quantitative paradigm instead of a

qualitative research design would have limited the nature and depth of the information obtained within the study.

Furthermore as the research was designed to be exploratory and descriptive, no attempts were made to establish causal relationships. Patton (2002) adds that the focus of exploratory research is on deducing meanings that cannot be examined experimentally. The researcher found this relevant to this study as it was designed to construe meaning to the experiences of significant role-players in the lives of children with visual impairment during the early childhood phase.

3.4. Sampling

Sampling is defined by Babbie (2013) as the process involved in the choosing of observations. For the purposes of this study, the researcher employed a purposive sampling method in the selection of research participants where each participant was selected for a specific purpose. Choosing the purposive sample is fundamental to the quality of data gathered; thus ensuring reliability and competence of the informant (Tongco, 2007).

In the case of this study, the researcher selected participants who were knowledgeable or experienced in the research area, and willing to converse and share information. The researcher therefore found it most relevant to employ purposive sampling rather than employing statistically sound probability samplings that would likely have generated little on the subject matter of the research. Participants were therefore selected for their ability to provide rich information.

The participants for this research study were selected from three specific groups. The researcher will now describe in detail the selection process, research instruments and sample size for each sample group.

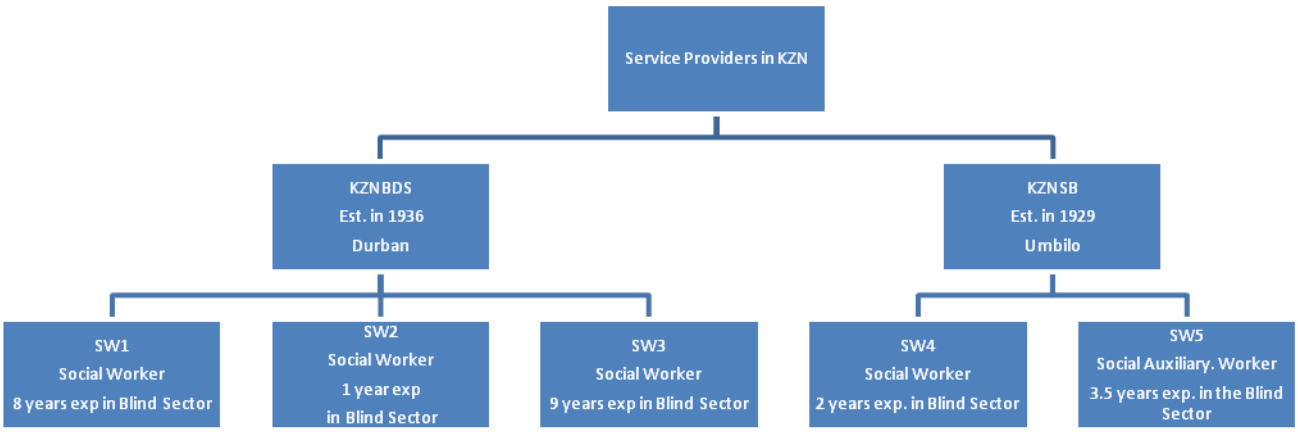
As there were several sample groups, using different research instruments, the following diagram, which is reproduced in chapter four, is hereunder presented to lend visual clarity to the discussion that follows. In addition, the diagram also sets out the sampling processes employed, which will again be discussed in chapter four to lend further clarity.

3.4.1. Sample group 1: Service Providers

3.4.1.1. Sampling procedure

The diagram below illustrates the selection process of the participants for sample group 1.

Diagram 1a: Sample group 1 (Service Providers)



The provision of Social Work Services in South Africa lies ultimately with the Department of Social Development (DSD). However in respect of Persons with Disabilities, DSD enters into Service Level Agreements (SLA) with non-governmental organizations (NGO) for the provision of specialized disability services.

South African National Council for the Blind serves as a National coordinating body of more than a hundred organizations for and of Blind and partially sighted persons across the nine Provinces of South Africa. These member organizations provide essential services to persons with visual impairments (of varying age groups) and their families, including but not limited to the provision of or referral to ECD programmes.

There are two such member organizations in KwaZulu-Natal that are also contracted by DSD as providers of Social Work services for visually impaired persons in KZN – KZN Society for the Blind and KZN Blind and Deaf Society. Both organizations are well established, one founded as early as 1919 and the other in 1936 (SANCB, undated).

Education needs of Blind and partially sighted children was a core area of service provision for both organizations evidenced by the establishment of the first School for the Blind in KZN by the KZN Blind and Deaf Society in 1954 and the establishment of Baumann ECD centre for blind and partially children by KZN Society for the Blind in 1988.
Research participants from this population group were therefore seen as able and reliable in providing information on the availability of ECD programmes in KZN.

Social Workers and Auxiliary Social Workers from both the above organizations were selected as research participants for sample group 1, with experiential years ranging from one to nine years.

3.4.1.2. Research Instruments

The researcher wished to explore awareness of the availability and accessibility of ECD provisioning for children with visual impairment in South Africa through a focus group with service providers. The researcher opted to use focus group discussion to gather information from the social workers or auxiliary social workers as it is a carefully planned discussion designed to obtain perceptions on a defined area of interest in a permissive, non-threatening environment (Mouton, 1996, 2001). A focus group schedule, comprising key questions, was used to prompt discussion in an interactive group setting. (Appendix 6)

Struwig, Struwig and Stead (2001) also maintain that using a focus group is advantageous in that it provides a secure setting for discussion without fear of criticism and where in-depth data on a topic can be obtained. The researcher was confident that participants would feel secure to share openly within the focus groups in that the themes for discussion were not based on personal experiences, but instead on the experiences of parents from a service provider's perspective.

3.4.1.3. Sample size

Sample group 1 comprised of representatives from the two organizations that provide social work and developmental services for visually impaired persons in KZN, as detailed above in 3.4.1.1. The two organizations in KZN, jointly have a total of fifteen social workers or social auxiliary workers in their employ. Five representatives agreed to participate in the focus group discussion.

3.4.1.4. Recruitment Method

The researcher first sought to secure organizational consent prior to engaging with prospective participants from the respective groups as proposed by Gochros (2008).

The process that the researcher followed to achieve this is set out hereunder:

- Letters of request (Appendix 2) were sent via e-mail to the respective Directors of the two Organizations – KZN Blind and Deaf Society and KZN Society for the Blind - requesting Organizational support to the study (Gochros, 2008).
- A positive response was received in writing from both Organizations confirming support for the study.
- The researcher subsequently forwarded letters (Appendix 3) to the two organizations, inviting the social workers and auxiliary social workers to participate in the focus group discussion. A letter detailing the content and purpose of the study was also included for the prospective participants.
- Five Social Workers agreed to participate in the focus group discussion.
- Individual consent forms were signed by participants (Appendix 9).

3.4.2. Sample group 2: Parents of Children with Visual Impairment

3.4.2.1. Sampling Procedure

For sample group 2, the researcher chose to interview parents of children with visual impairment between the ages of 3 to 9 years old. For the purpose of this research, parent is defined as ‘a primary caregiver that is responsible for the child during the ECD stage, including biological parent, kinship carer (e.g. grandmother / aunt) and foster / adoptive parent’.

This was deemed essential to glean rich data from persons who were directly affected by the perceived problem of limited ECD provisioning. The research participants were primarily selected from the clientele of both KZN Blind and Deaf Society and KZN Society for Blind. One parent of a learner at Open Air School in Glenwood, KZN also participated in the study.

3.4.2.2. Research Instruments

Semi–structured interviews were deemed to suit the purpose of eliciting rich data from various parents. The researcher therefore conducted semi-structured interviews with parents of children with visual impairments drawing on their experiences / challenges whilst trying to source ECD programmes in KwaZulu-Natal. The face-to-face interviews were guided by an interview schedule (Appendix 7) that helped to focus on key areas / aspects related to the sourcing of ECD programmes (Struwig et al., 2001).

3.4.2.3. Sample size

Parents of children with visual impairment who are between the ages 3 to 9 were invited via the social workers to participate in the study. A limited number of parents were selected based on availability and access, from a larger set of possible choices which falls within the stratified purposeful sampling strategy (Patton, 2002 as cited in Gray, 2009).

The choice of parents from this age group of children is based on two reasons:

- It falls within the range that World Health Organization defines as early childhood that is the period from "from prenatal to eight years of age" (World Health Organization, 2007).

- It would provide rich data from parents that are in different stages of the early childhood development phase, including those that are in post ECD stage.

Parents that met the criteria were recruited from the database of the two Organizations and referred by the agency social workers. Participation or non-participation in an ECD programme was not a prerequisite for parents to be included in the study.

The researcher noted that whilst the initial age range was targeting children between 3 to 9, the parents that volunteered to participate had children between the ages 3 to 11. The researcher chose to include parents of children outside of this original range to gather additional data as these parents have already been through this stage. The researcher was particularly interested in their experiences and challenges (if any) whilst seeking ECD programmes for their children, how these were overcome and the impact on learning during post ECD stage.

Furthermore four of the eight parents interviewed also had more than one child with visual impairment, with the older child being 17 or 18 years old, the significance of which is discussed in further detail in Chapter 4.

Whilst there were no set restrictions to the participation of parental couples in the study, only one parent per child responded and was interviewed by the researcher.
Informed consent forms were completed and signed prior to their participation (Annexure 10).

3.4.3. Sample group 3: Foundation phase Educators of Children with Visual Impairment

3.4.3.1. Sampling Procedure

This sample was of foundation phase educators who are currently employed at schools for the blind and partially sighted in KZN. There are 8 member organizations in KwaZulu-Natal that render services for people with visual impairment: - 2 Social Work Agencies as mentioned above, 3 Schools, 2 Skills Training Centres and 1 Crafts / Recreational groups (SANCB, undated). The three Schools in KZN are Arthur Blaxall School for the Blind in Pietermaritzburg, Ethembeni School in Cato Ridge and Open Air School in Glenwood. While Arthur Blaxall School caters only for children with visual impairment, both Ethembeni and Open Air Schools accommodate children with varying physical disabilities including visual impairments. The schools all offer primary and secondary levels of education commencing with Grade R. (SANCB, undated).

3.4.3.2. Research Instruments

Foundation phase educators from the three schools that cater for children with visual impairment in KZN were invited to participate in this research. The researcher used semi-structured interviews, guided by an interview schedule (Appendix 8) to explore the views of educators on the availability and accessibility of ECD programmes.

The researcher chose to utilise face-to-face interviews, instead of questionnaires, with both the parents of visually impaired children (Sample group 2) and foundation phase educators at schools for the blind and partially

sighted (Sample group 3) in order to gather descriptive data from the participants in their own words (Bogdan & Biklen, 2003).

3.4.3.3. Sample size

There are 23 schools for the Blind and partially sighted in SA, with only three located in KZN (SANCB, undated). Foundation phase educators from the three schools for children with visual impairments in KZN were invited to participate in the research. This sampling strategy, according to Patton (2002) is stratified purposeful sampling, where the researcher selected a stratum (Special schools for children with visual impairment in KZN) and then purposefully chose participants (foundation phase teachers) to fulfil the aim of the study. Participants were invited in writing and asked to sign the Informed Consent forms.

3.4.3.4 Recruitment Method

The process to select participants for this sample group is set out hereunder:

- Letters of request were sent via e-mail to the respective Principals of the three schools, requesting participation in the study (Appendix 5).
- Positive responses were received from two of the three schools, with no acknowledgement from the third school. This non participation would have implications on the overall findings of this study, which the researcher will explore further in the Results and Discussion in chapter 4.
- Three foundation phase educators from Open Air School in Glenwood and two educators from Arthur Blaxall School in Pietermaritzburg agreed to participate in the study.
- Individual consent forms (Appendix 11) were signed by participants prior to the interviews, which took place at the respective schools.

3.5. Data Analysis Methods

The researcher opted to use qualitative content analysis as it is most appropriate for the analysis of the subjective viewpoints of participants (Flick, 2008). To this end, the researcher was able to, through the use of qualitative content analysis, convert data into findings, thereby addressing the research problem (Coleman & Unrau, 2008).

The researcher was guided by the five step approach to data analysis as proposed by Terre Blanche and Durrheim (1999) and Terre Blanche, Durrheim and Painter (2006) as well as Coleman and Unrau's six step framework (Coleman & Unrau, 2008).

The first step was to prepare the data by transcribing the focus group discussion and interviews from auditory recording into written text. The researcher undertook to personally transcribe the data, thereby allowing for optimal immersion in and familiarity with the data prior to analysis. This also allowed for themes and meaning to become evident during data collation.

The researcher then reviewed the data by reading the transcriptions of the focus group discussion and each interview. Key points of interests were then identified and highlighted. Terre Blanche & Durrheim (1999) refer to this second step as Induction, which needed the researcher to establish the principles that underlie the data.

The researcher then engaged in the next step of the data analysis process called coding, which refers to highlighting sections of the data as being relevant to specific themes (Terre Blanche & Durrheim, 1999).

Coleman and Unrau (2008) proposed that there are two levels to coding. The first level of coding involved the identification of a combination of meaning units. The researcher thereafter identified the similarities and differences between the meaning units, and those that were similar in description were then put in the same categories. The researcher then compared the similarities and differences between these categories to identify any associations that might exist.

The next step called for the interpretation of the categorised data. The researcher achieved this through determining relationships between the major themes. Terre Blanche and Durrheim (1999) refer to this step as Elaboration, the purpose of which is to capture finer nuances of meaning that underpin the codes.

The researcher then engaged in the final step of the data analysis: interpreting thick descriptions and checking data against the literature review, theoretical framework, subject positions and initial assumptions.

3.6. Trustworthiness

Qualitative research, according to Lincoln and Tierney (2004 in Gray, 2009) is exposed to the risk of being rejected on the grounds of being 'unscientific' and incapable of generalization. It is therefore imperative that qualitative research is designed to meet the criteria of trustworthiness – credibility, transferability, dependability and confirmability.

The researcher ensured the credibility of this study by adopting a reflexive stance through repetitive checks of the researcher's interpretations (Whittemore et al., 2001 in Gray, 2009).

The researcher further ensured the credibility of the study through triangulation, which is described by Flick (2002) as a combination of methods

used to deal with a phenomenon. The researcher used multiple and different sources (service providers, parents and educators) and methods (interviews and focus groups) to gather rich thematic data.

Transferability, the degree to which the results of a study can be generalised to other situations, further demonstrates the rigour of a research study. Trochim (2000) maintains that transferability can be enhanced by thoroughly describing the research context, which the researcher achieved through the detailed depiction, including the use of diagrams and tables, of the three strata of data collection. The researcher further ensured transferability through the use of thick descriptions of data that would enhance the replication of the study.

Dependability was ensured through the use of prolonged engagement with participants and triangulation. Triangulation in the use of three sample groups, where data collected could be compared and verified. Furthermore, the researcher ensured adequate engagement with all participants before, during and even after the data collection step was undertaken.

Confirmability - The researcher utilized audio recordings and verbatim transcriptions of interviews and focus group discussions to ensure neutrality in the analysis and interpretation of the lived experiences of parents of children with visual impairment. These are available for scrutiny from the researcher and her University supervisor.

Multiple triangulation also provided means to ensure confirmability, the researcher using multiple sample groups, methods of data collection and research instruments. Regular consultation with the research supervisor also facilitated the confirmability of the study.

3.7. Ethics

Clearance was obtained from the Ethics Committee of the University of KwaZulu-Natal following the researcher's application for ethical clearance (Appendix 1). The Directors of the two organizations and the Principals of the two schools granted me access by approving my research request and permitting data collection through their respective organizations and schools. Letters of informed consent were issued to all participants – social workers, parents and educators. Consent forms were issued to and signed by all participants.

Researchers in the social sciences are bound by a code of ethics, which include two traditional guidelines viz. informed consent and the protection of subjects from harm.

3.7.1. Informed Consent

Flick (2006) maintains that full information, comprehension and voluntarism are three key elements of informed consent. The research participants were made aware of the study through an information letter that provided the details of the study, including the research title, aim and research instrument to be used. Participants were therefore aware of the nature of the study and able to make an informed decision to participate or not.

The researcher discussed the informed consent forms prior to the focus group discussion and each interview. The researcher ensured that the participants were aware that they were free to withdraw from the study if they felt it necessary to do. Consent for the recordings of interviews and focus group discussions were also explained to and obtained from participants.

3.7.2. Anonymity and Confidentiality

These guidelines, which form the cornerstone to research ethics relate to the protection of the research subject from harm. Kearney (2009) reveals that there are varying and conflicting interpretation of these ethical terms and leans towards the more pragmatic definitions by Salkind (2009): 'anonymity' in research means records cannot be linked to names and 'confidentiality' as when anything learned during the research is held in strictest confidence (Kearney, 2009). The researcher ensured confidentiality of the participants throughout the study by removing the names of participants from the transcriptions. This was further achieved through the storage of all research material, recordings and transcriptions in a safe place that no one else had access to as proposed by Flick (2006).

3.8. Limitations of the study

These are discussed in the final chapter as it allowed the researcher to comprehensively interrogate the limitations of the study and thereby provides the context for recommendations for future studies**.**

Chapter Four
Findings and Discussion

4.1. Introduction

The purpose of this chapter is to present findings obtained during the fieldwork of this research. The data was transcribed by myself and thereafter printed and coded. The different codes were then grouped into themes as per thematic content analysis discussed by Dixon-Woods, Agarwal, Jones, Young, & Sutton, (2005). All the transcripts from the interviews and focus group discussions will be available for further scrutiny until 2019, from the researcher and supervisor.

The study addressed the research questions based on the assumption that the limited ECD programmes available to children with visual development may have a discernible effect on their early childhood development.

Whilst the researcher used Cognitive Development Theory to arrive at the specific themes, the critique of these themes was achieved by using the Anti-Oppressive Theoretical framework outlined in chapter 2.

4.2. Background to Research Participants

The study was designed to explore the availability of ECD programmes for children with visual impairment in KwaZulu-Natal (KZN) by researching the experiences of social workers, educators and parents of children with visual impairments. The data collected is therefore presented in line with using these three different sample groups.

Prior to embarking on the analysis of data collected, the researcher believed that it was essential for the reader to fully understand the details of each sample

group, which are presented in the diagrams and tables below, followed by a detailed description of each category.

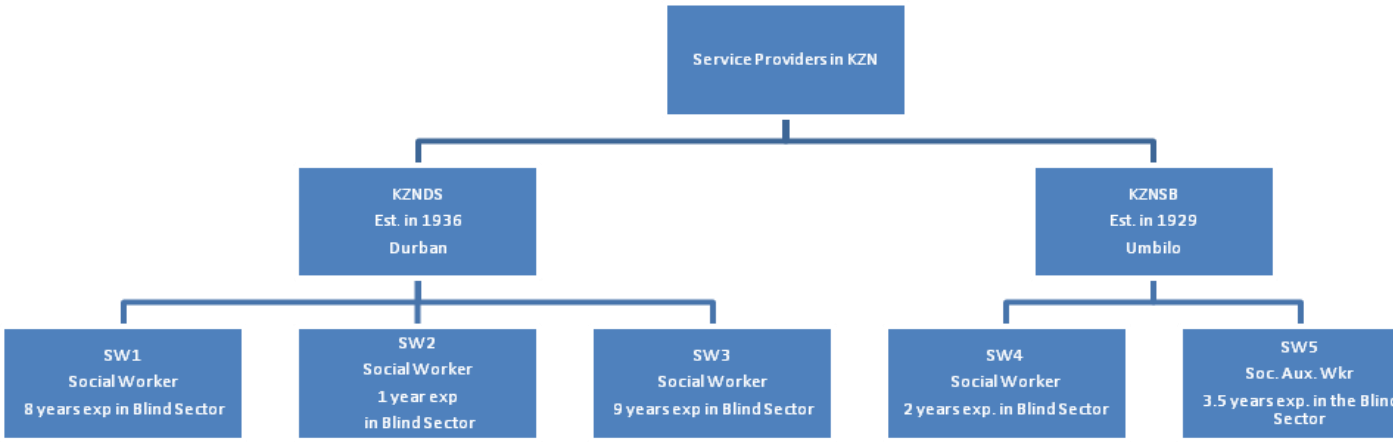
These 3 sample groups were described as originating from the 3 groups of significant role-players during the early developmental phase of a visually impaired child. As discussed in chapter 3, group 1 included the sample of social workers or auxiliary social workers that were representatives of the two service providers in KwaZulu-Natal; group 2 comprised the sample of parents of children with visual impairment and group 3 was the sample of foundation phase educators employed at the schools for the Blind and partially sighted.

The research instruments used in each instance were focus group discussions for sample group one and semi-structured interviews for both sample groups two and three, guided by an interview schedule.

4.2.1. Sample Group 1: Social Work Service Providers

The following diagram illustrates how the participants of sample group 1 were selected and their years of experience working with people with visual impairment.

Diagram 1b: Sample Group 1 (Service Providers)



The Department of Social Development is ultimately responsible for the provision of social services to persons with disabilities. This responsibility is re-directed to various non-government organizations in the Province, through the provision of subsidies and where the department plays a role of monitoring and evaluation. In KZN, there are two such non-government organizations that provide social work services for people who are visually impaired, viz. KZN Blind and Deaf Society and KZN Society for the Blind.

KZN Society for the Blind was established in 1919 and is situated in Umbilo, whilst the KZN Blind and Deaf Society was established in 1936, and is situated in central Durban. Both organizations employ Social Workers and Orientation and Mobility Practitioners (specialist trainers) who provide professional counselling, support, daily living skills and independence training for people with visual impairments (SANCB, undated).

Social Workers play an integral role in advising families of the resources available e.g. schools as well as facilitating applications where necessary. Social Workers and Social Auxiliary Workers, representing the two organizations, were invited to participate in a focus group, which formed sample group 1 of the study. The participants in the study had varying years of experience working with persons with visual impairment – ranging from 1 to 9 years.

4.2.2. Sample Group 2: Parents of Children with Visual Impairment

Details pertaining to the parents that were interviewed as part of sample group 2 are presented hereunder.

Table 1: Details of Sample Group 2 (Parents)

Participants	Location	Age of VI Child	Schools	Age started school	Hostel
Parent 1	Malvern	17 , 5	Open Air	5 yrs 3 yrs	No
Parent 2	Kwa Mashu	10 , 3	ABS	7 yrs	Yes
Parent 3	Illovo	17, 9, 5	ABS	5 yrs	Yes
Parent 4	Inanda	6	None	N/A	N/A
Parent 5	Illovo	5	None	N/A	N/A
Parent 6	Umlazi	18, 11	Ethembeni Open Air	5 yrs 3 yrs	Yes No
Parent 7	Inanda	5	Baumann ECD	4 yrs	Yes
Parent 8	Umlazi	3	Baumann ECD	2.5 yrs	Yes

The parents of children (between 3 and 9 years old) with visual impairment were invited through the social workers of KZN Society for the Blind and KZN Blind and Deaf Society to participate in this research. The researcher held one-to-one interviews with the parents. The Social Worker from the agency/society assisted with Zulu translation where it was needed.

4.2.3. Sample Group 3: Foundation Phase Educators of Children with Visual Impairment

There are three Schools for the Blind in KZN, whose foundation phase educators were invited to participate in this research. The details of these schools are tabulated below.

Table 2: Details of Sample Group 3 (Educators)

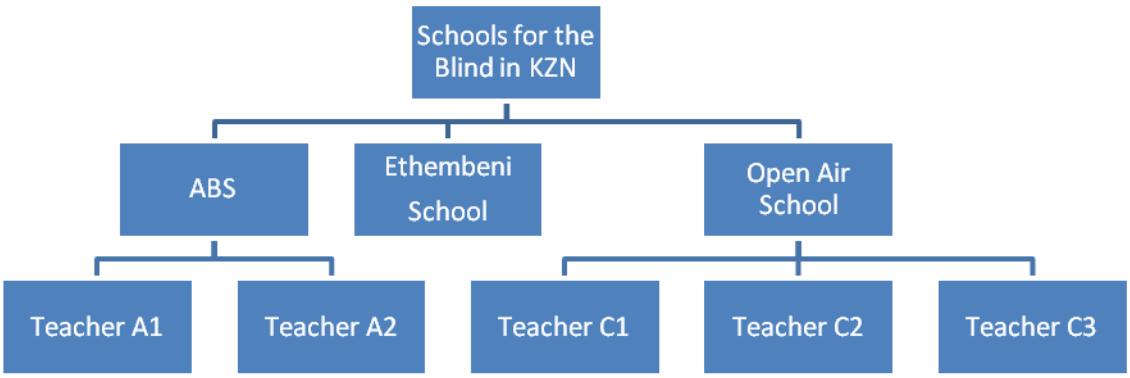
Name of School	Arthur Blaxall School	Ethembeni*	Open Air School
Type of School	School for the Blind & Partially sighted	School for Children with Disabilities	School for Children with Disabilities
Location	Pietermaritzburg	Inchanga	Glenwood
Year Established	1954	1968	1921
Learner Population	210	+/- 270	301
Number of learners per class	14	Data not available	18
Residential learners	12	Data not available	0
Day scholars	2	Data not available	18
Entrance Age	5 years	5 years	3 years

* This school did not participate in the research. Information reflected in the table above was obtained through the internet and is therefore limited.

There are 21 schools for the children with visual impairment in South Africa, all affiliated to the South African National Council for the Blind (SANCB, undated).

Three of the schools are located in KwaZulu Natal – Arthur Blaxall School for the Blind (ABS) in Pietermaritzburg; Ethembeni School in Inchanga and Open Air School in Glenwood, the details of which are reflected in table 2 above. Whilst all three schools were invited to participate in this research, only two – ABS and Open Air School responded positively resulting in 5 interviews with educators, as depicted below in diagram 2.

Diagram 2: Sample group 3 (Educators)



The teachers interviewed had varying levels of experience – ranging from 1 to 26 years' experience in special education. Arthur Blaxall School's entry level is Grade R, when the child is 5 years old, whilst the Open Air School's entrance

level is pre-school, when the child is 3 years old. The classroom size at Arthur Blaxall is 14, and Open Air has a total of 18 learners in both the pre-school and grade R classes. One other significant difference between the two schools is that ABS offers boarding facilities for its grade R learners (12 out of 14 learners) whilst Open Air only takes in day scholars.

4.3. Results and Discussions

4.3.1. Emerging Themes from the data

The categories and themes that emerged during analysis of data are tabulated below. This tabulation allows one to see the relationship between the categories and the themes that are used as headings in discussing results of the study.

Table 3: Emerging Themes

Meaning Units	**Themes**
Special Education training	Inadequate specialist training
Specialised skills – Braille	
Specialised training – O&M	
Limited services	Service unavailability
Early intervention	
Parent guidance and support	Insufficient awareness and support
Support services	
Lack of information	
Awareness	
Assistive devices	Limited resources
Transport	
Cost of school and hostel fees	
Accessible format	

4.3.2. Analysis and Discussion of themes

During the analysis of the qualitative data, the various interviews and focus group discussions were transcribed in order to identify themes. There was clear overlap in the findings in respect of the different sample groups. Hence, to improve readability and present a holistic picture of the availability of early childhood development programmes for children with visual impairment, these findings are presented under the themes pertinent to the groups, without necessarily demarcating the sample grouping itself, unless this information is considered pertinent to the findings. These themes include awareness and support (4.3.2.1); inadequate specialist training (4.3.2.2); unavailability of services (4.3.2.3) and limited resources (4.3.2.4)

4.3.2.1 Insufficient Awareness and Support

The researcher deduced from the analysis of the various audits of ECD provisioning in South Africa that an overwhelming lack of information or awareness seems to prevail in the country. This lack of clarity exists even within the ECD sector, regarding who is responsible for the provision of early intervention services and the specific roles of the government departments and NGOs, resulting in the absence of clear guidelines for NGOs to deliver high quality services or to streamline collaboration between NGO and the Department of Basic Education.

Participants from all three sample groups identified insufficient information and support as key aspects affecting how visually impaired children's ECD needs are met. Parents in particular reported that they did not know where to go for assistance and what support was available, as substantiated by the following statements:

When he was 5 years old, I took him to the "normal" school because I didn't know where to take him (Parent 2); and

I started with the schools in the area….. The teachers told me she's not coping & that she was being a hindrance to the rest of the children.… (Parent 1)

The statements above draw our attention to anti-oppressive practice of exclusion and "othering" as substantiated in a study by Subrayen (2011).
The researcher recognises this to be one of the major obstacles to early identification and thus meeting the ECD needs of children with disabilities. The researcher further deduces that limited awareness of the resources available for children with visual impairment underpins their exclusion. Parents are therefore restricted from making informed decisions regarding meeting the education needs of their visually impaired child.

Data also suggests there is stigma associated with visual impairment. Subrayen further maintains that parents were ashamed to send their child to a school for disabled children, and instead kept them indoors, with no access to education. Subrayen's findings above appear to be aligned to the findings of this study, as evident in the statement by Parent 1 below:

…people look at any type of disability as something wrong with the brain….. It carries a stigma, you tell people your child is in a special-ed school, and immediately they think that something is wrong with her brain. (Parent 1)

The researcher recognises this as a further obstacle to early identification and intervention.

In response to the researcher's question regarding support and resources during early diagnosis, Parent 1 stated:

> *Absolutely nothing with my first born. It was a very big challenge. It was all new to me.* (Parent 1)

This is corroborated by participants from sample group 1, who reported during the focus group discussion that the lack of information and support for parents restricts their role in facilitating early intervention.

> *Parents choose to stay at home*, there is a *dependency on faith / cultural beliefs and then they only come back when the child is 6 or 7 years old in search for a school.* (Social Work 1)
>
> *... parents go to the clinic or hospital – find out the child's blind, then go back to the community. The child stays within that community until he/she is 6/7 years and then only think of school – when they start seeking help. And that gap – you've already lost out on that crucial period for cognitive development*.
>
> (Social Work 3)

Data suggest that the lack of information or awareness inevitably causes a delay in parents actively seeking advice or support in how to adequately meet the ECD needs of their visually impaired children. There is a lack of awareness of the resources available, resulting in a lack of intervention and stimulation, which then results in developmental delays in the child with visual impairments.

The researcher found this to be in keeping with findings by Richter et al. (2012) who maintained that the family is the most appropriate carer for a child from birth to 2 years with support from the Government. However once children are between 3 and 4 years, families require greater assistance in providing learning opportunities for young children. The researcher concurs with Richter et al. (2012) that services and resources need to be appropriately apportioned across the age range, with more governmental support for parents and families across the ECD age range. The researcher believes that the support from government should include early detection of disabilities, tracking and referrals to appropriate and specialised services, all of which contribute to meeting the ECD needs of children with visual impairment.

The focus group also identified the need for early identification and tracking from hospitals or community based clinics when visual impairment is first diagnosed, so that parents receive the appropriate advice and referrals to the relevant resources as early as possible. To this end, the researcher agrees with the recommendation by Philpot et al. (2012) that it is important to provide support to parents and caregivers of children with disabilities, which should include "tracking developmental milestones, teaching independence and caring for children" (p. 17).

They further maintain that disability awareness programmes are critical components in reducing the vulnerability of children with disabilities. Whilst in support of this view, the researcher believes that this is not really feasible in South Africa considering the limited networking that exists between various government departments, who have shared responsibility for ECD (Williams & Samuels, 2001).

A more recent situational analysis by Philpot et al. (2012) confirm that early identification does not appear at the forefront of the health care priorities for children in South Africa. This is evident by the failure to successfully implement a national screening programme, despite developmental screenings initiatives in the Western Cape during the last decade.

Philpot et al. (2012) report that a formal evaluation was conducted in 2003 which revealed that not all facilities conducted developmental screenings and if they do, not according to protocol.
The researcher is of the opinion that the above shortcomings and failure to implement a national screening programme is the basis for the absence of tracking systems and lack of information / awareness and support in keeping with research data presented in this study.

The lack of information or awareness seems to also prevail amongst the foundation phase teachers of children with visual impairment. There seems to be limited knowledge of the resources available for visually impaired children and their parents, as evident in the responses below to the question: Are you aware of other schools or programmes that cater for visually impaired children at ECD level in KZN?

> *There is, I think. SANCB – they send their children to our school. I don't know of any other school.* (Teacher 4)

> *I'm not sure of other schools around here.* (Teacher 5)

> *Blind Society stopped their ECD… I think.* (Teacher 2)

This limited awareness of the resources that are available for children with visual impairment suggests that parents may not be appropriately referred for additional support where needed. The researcher is of the opinion that the participants were focussed on their own school and how much they have achieved and in some instances were unaware of the resources beyond their school boundaries. This also implies limited networking among the schools and referral agents.

Kumashiro (2009, cited in Baudu, 2012) however proposes that it is not just a lack of knowledge that hinders transformation from the oppressive status quo but also our resistance to knowledge. The researcher agrees with Baudu (2012) who further describes this as a choice between apathy and action. The researcher aligns this to the significant role that educators need to play in advocating for the basic rights for children with visual impairment.

Non integration of services was identified as one of the main challenges in the health sector. Philpot et al. (2012) maintain the Department of Health lacks a co-ordinated protocol to meet the needs of children with disabilities.

The findings in the present study endorse these findings that this challenge exists across all governmental departments, which contributes to the absence of collaboration regarding service delivery for children with disabilities, in this case ECD provisioning for children with visual impairments.
As a result, services are side-lined, thereby hindering the early childhood development of children with visual impairment which according to Dominelli (2002) constitutes oppressive practice.

4.3.2.2. Inadequate specialist training

One of the challenges discussed in the literature review in adequately meeting the ECD needs of children with visual impairment is that ECD practitioners and teachers in South Africa receive generic training in child development, with little or no focus on stimulating or developing children with visual impairment (Sukraj-Ely, 2008).

Furthermore their lack of experience in working with children with disabilities prevents their willingness or ability to accommodate a child with visual impairment in their mainstream ECD programme.

There was consensus among all sample groups that specialist training is needed to effectively teach visually impaired children. Suggestions for such training included general disability awareness, Braille skills and orientation and mobility skills.

There was a clear indication from the participants of sample group 2 that teachers are not adequately prepared or trained for this role. This is reflected in the following statements:

> *...when I first came here, I had no training whatsoever. I've done PGCE to enter into teaching. That didn't prepare me for any disability or special education. (Teacher 1)*

> *It's not like I knew Braille, but I needed to know how to teach pre-braille skills and Braille. Teachers are not prepared for that, no special education training. (Teacher 1)*

The inadequate preparation of personnel working with children with disabilities was also identified during the focus group discussions as a contributing factor to the limited ECD services for children with visual impairment as discussed by the participants from sample group 1 (Service providers) :

> *Service providers …everybody that goes through university just has their generic training, even we, as Social Workers or teachers, we weren't trained specifically to work with people with disabilities. (Social Work 3)*

The researcher found the data to be in keeping with the findings of the 2001 – 2011 Situational Analysis by Philpot et al. (2012) where training for educators on the specifications and use of assistive devices was found to be significantly limited.

The researcher agrees with Baudu (2012) when she proposed that people may awaken from a state of apathy or being passive through anti-oppressive strategies and become engaged in an anti-oppressive movement through education. The researcher found this relevant to stakeholders in the sector – parents, social workers and educators - and their role in advocating for ECD services for children with visual impairment. ECD practitioners or educators for instance play an important role in ensuring the inclusion of visually impaired children in ECD programmes as substantiated by an ECD educator below:

> *… I'm big on inclusion and I think out of the box…. It's a lot more work, so for a sighted child, you'd do the math on the board and for the blind child, you'd use the six dots, find things on a tray… more work but I think it's do-able.*
> *(Teacher 2)*

Anti-oppressive practices however are not trouble-free as stated by Kumashiro (2001) as they often make people feel uncomfortable with how they think and feel about not only the "Other", but also themselves. Oppressive practices or norms can only be challenged once this critical realization takes place.

The importance of inter-departmental collaboration is recognised in South Africa's various policies and plans, including the Education White Paper 5 on Early Childhood Education. However, research together with anecdotal experience shows that intra-departmental non-collaboration is lacking in South Africa. The researcher believes that this non collaboration translates into obstacles to fulfil the desired objective of early identification and appropriate service delivery for children with disabilities.

This is supported by Richter et al. (2012) who also found there to be very little inter-sectoral collaboration in early childhood services.

Specialist training extends to the rehabilitation process, which includes a range of interventions that focus on improving functional ability, enhancing independence and promoting inclusion. The availability of appropriate human resources is an important means to measure the adequacy of rehabilitation services in the sector. The paucity of rehabilitation personnel has a direct impact on the early identification of and intervention for children with disabilities as highlighted by participants from sample groups 1 and 2.

Orientation and Mobility refers to a specialist skills training programme for people with visual impairment, one that is considered as a scarce skill. Orientation is defined as the process of using sensory information to establish and maintain a position in the environment. Mobility is defined as the process of

moving safely, efficiently, and gracefully within the environment. The combination of orientation and mobility is a "fundamental and enabling life skill" (Huebner & Wiener, 2001, p. 579).

It is maintained that the ultimate goal of orientation and mobility instruction is for visually impaired persons to be able to operate in any environment as independently as possible. The findings of this study however suggest that the provision of this significant training was lacking in the Province and especially in the school environment. Both the schools that participated in the research did not have Orientation and Mobility (O & M) Instructors as part of the school staff structure.

This gap in service was further compounded by the fact the training that was available from the two social work agencies was very limited and did not necessarily start during the early childhood stage. This is evident in a statement from a social worker as part of the focus group discussions:

> *...we don't train (orientation and mobility) the children until they are ready for school. Sighted children start to walk at 18 months…which means a blind child is denied that opportunity. (Social Work 1)*

The researcher has highlighted the significance of O&M training within the school environment in Chapter 2, positioning orientation and mobility (O&M) as an integral part of the comprehensive services for children with visual impairments. However it is clear from the data collected from sample groups 1 and 3 that this specialist training was not a priority for the Department of Education as substantiated in the response below:

They (O&M practitioners) are linked to Blind Society (KZNSB)…….And we can't train the kids, we not allowed to, so there's a huge shortage. I just feel that the government should guide us. (Teacher 4)

The researcher believes that the above statement aptly sums up the non-availability of specialist skills training within the school environment and who shoulders the responsibility for such crucial services. The O&M practitioners referred to in the statement above are qualified personnel that are employed by the non-government organizations in KZN and not by the school or Department of Education. Furthermore these posts are non-subsidized which mean that, the non government organization is solely responsible for this specialist skills training.

The researcher also found that participants seem to have an expectation that this specialist training should be provided, but at the same time seemed unaware that this provisioning should be the responsibility of the school or the Department of Education rather than an NGO, as is currently the case in KZN. This non awareness is captured in the quote below:

They (O&M practitioners) are linked to Blind Society (KZNSB) and we are supposed to see them once a week. But we don't. I heard that the two left and we are on our third one. (Teacher 3)

An additional challenge is that there are only two service providers in KZN, who employ 4 or 5 O&M practitioners between them that are responsible for training in the whole province including the schools. This limited human resources impacts negatively on service delivery and skills training as evident in the response below:

Learners don't know the basic skills, mobility, how to move…Simple things – trailing and walking, putting your hands in front when walking. Parents can be guided on these basic skills at home e.g. mobility (Teacher 1)

The researcher therefore surmises that the deficiency in terms of specialist training, as detailed above serves as a barrier to inclusionary practices of visually impaired children in early childhood programmes in KZN.

4.3.2.3. Service unavailability

The new developments in policies and legislation created greater opportunities to fulfil the rights of children with disabilities in South Africa. Expansion of ECD as stipulated by The Children's Act (2007) must target children who are most in need of early childhood intervention – including children with disabilities.

The findings of this research however suggest that ECD services for children with visual impairment remains limited and inadequate.

It has been established, through the analysis of Care Dependency Grant beneficiaries, that only 24 percent of children between the ages 0 to 6 years who were recipients of the CDG attend a crèche or child-minding group (Philpot et al., 2012).

Paucity of resources and finances is further corroborated by the findings of this study that suggest that there are insufficient services available, within either the mainstream facilities or special schools, for children with visual impairment

during the early childhood development phase described in the words of respondents from sample group 3 as follows.

> *...we are the only school in Durban that caters for the visually impaired grade R learner – is just not adequate.* (Teacher 1)

> *It's not widely available and if it is, it's expensive. (Teacher 2)*

> *We are the only academic school which in itself can lend to frustration for parents because we don't always have the availability of space (Teacher 3)*

The non-availability of services was further highlighted during the focus group discussion. The participants maintained that services intended to meet the educational needs for children with visual impairment were limited in KZN, especially during the ECD phase as follows:

> *...if its ECD specific for visually impaired children, then it's an ECD programme that either non government organization is offering. (Social Worker 3)*

> *The challenge we have then is that there's only 3 schools that cater for visually impaired children in KZN. (Social Worker 4)*

> *When they heard that there's only 3 schools in KZN, nowhere near Maphamulo, where they live. All barriers went up. How do they let go of their child at such a young age. (Social Worker 1)*

The rationale behind the South African government's plan to enhance access to Grade R by 2014 is that Grade R was viewed as a means to address inadequate, poor development of skills – social, cognitive and motor skills. The researcher wonders how this plan would address the ECD shortfall for children with visual impairment as there are only 3 schools for the Blind and partially sighted in KZN.

Exclusion from resources, which ultimately is a form of oppression, is a significant concern for social workers as demonstrated in the statements above. Dominelli (2002), a leading Anti-Oppressive theorist, defines oppression as "relations that divide people into dominant or superior groups and subordinate or inferior ones. These relations of domination consist of the systematic devaluing of the attributes and contributions of those deemed inferior, and their exclusion from the social resources available to those in the dominant group" (p. 8). In this study, the researcher was able to demonstrate the devaluing of the ECD needs of children with visual impairment, evident in their exclusion from the social resources available sighted children.

4.3.2.4. Limited Resources

Participants from all sample groups identified the availability of resources as one of key challenges in adequately meeting the early childhood needs of children with visual impairment. Research substantiates that there are a number of barriers that hinder access by children with disabilities (Bam, 2012; Kearney, 2009). For the purposes of this research, resources refer to financial resources, material resources - assistive devices and accessible format and human resources and these are discussed hereunder.

Financial Resources

One of the challenges that featured strongly amongst participants was of limited financial resources. These included financial restraints from the perspectives of parents as well as schools or service providers as described by sample group 1 participants in the following quotes:

> *Most of our clients are from lower socio-economic sector. Sometimes parents can't afford school fees and boarding fees. (Social Worker 3)*

> *Sometimes the Care Dependency Grant is the only income in the home, then if the child goes away to boarding school – risk of losing that source of income (Social Work 1)*

> *Also taking your child from Maphumulo to Pietermaritzburg and then going back home and then picking them up 4 times a year. Plus having to pay their fees, boarding fees and buy whatever extra they need. (Social Worker 3)*

The limited number of schools for visually impaired children inevitably means that families have to travel long distances to transport their children to and from school, putting an added burden on family resources. This concern is captured in the words of participants from interviews with teachers as follows

> *Since this is a day school, they need to be transported everyday (Teacher 2)*

> *Transport to get here – serving the whole of KZN – the costs to get to school – expensive and is a nightmare. (Teacher 2)*

Material Resources - Assistive Devices/ Accessible format

The first challenge with regard to reporting on assistive devices is that there is no database that systematically tracks the provision of these devices to children with disabilities in South Africa. Philpot et al. (2012), report that despite there being some progress, there is still a significant limitation in terms of the provision of assistive devices in the education sector.

This limitation described above corresponds with the findings of this study, evident in the responses of a teacher from sample group 3 and a parent from sample groups 2:

> *It's expensive as I said – so to have a brailler at home costs a lot of money. (Teacher 2)*

> *I was introduced to OAS by the optometrist, who also introduced me to assistive devices and visual aids. Even now she's in a mainstream school; she uses monocles to read. (Parent 1)*

The findings of this research clearly indicate how essential assistive devices are in meeting the ECD needs of children with visual impairment as well as some of the challenges experienced. It has been established that it is important to equip schools that admit learners with disabilities with material resources. However the researcher agrees, as stipulated in DSD's Policy on Disability, that it is also essential to train staff and learners on the use of the assistive resources, as well as how to store and maintain them, rather than just supply the necessary resources (DSD, 2008).

This was also identified as one of the challenges faced by educators of visually impaired children as described below:

> *Equipment is so expensive, only one supplier for Braille machines. Repairs are also a problem. (Teacher 3)*

Another challenge that hinders the inclusion of visually impaired children in ECD programmes is the need for all learning materials to be adapted to an accessible format – tactile / auditory learning aids, large print or Braille. These adaptations are essential in facilitating the learning environment for a child who is visually impaired, as described by a parent from sample group 2.

> *… when she was in Open Air School, I know that the material at school was enlarged and given to her. Even the lines – they used to order a book with darker lines so she would see where she is writing. All that made such a difference. (Parent 1)*

The findings of this study also reflect that there are shortcomings in this regard in that there are often errors with the material that is transcribed from print to Braille, evident in the statement below by one of the educators:

> *…from Department of Education… but they haven't really spoken to the teachers working with children with visual disability, so the books we got that were brailled for example were incorrectly brailled. Test papers are also not always correctly done.*
> *(Teacher 2)*

The findings of this study further reflect that schools were provided with a print copy of the learning material and had to facilitate the transcription on their own, as elaborated in the following statements by teachers:

> *Textbooks are a huge problem. We have received some equipment through the lotto programme, but its still not enough / loads in comparison. We still do a lot of it (brailing textbooks) (Teacher 3)*

> *…the school receives the textbook from Department of Education and then it's the school's responsibility to transcribe it into Braille copies. (Teacher 3)*

The researcher recognises that the provision of learning material in an accessible format is crucial for meeting the ECD needs of children with visual impairment, and further recognises that significant stakeholders play a crucial role in terms of reasonable accommodation. The above finding is supported by Subrayen (2011) who found that ignorance about reasonable accommodation e.g. information accessibility left visually impaired learners feeling oppressed, resulting further in a sense of being "othered", a defining characteristic of anti-oppressive theory.

Human Resources

Research data also highlights another problem that serves as a barrier to the provision of appropriate services for children with visual impairment in the health, education and social development sectors is the shortage of human resources as described hereunder in a statement by one of the social workers during the focus group discussion:

However the reality is that there are only x number of social workers that cover the whole of KZN and all blind children.
(Social Worker 3)

Challenges around human resource capacity in the social development sector impact negatively on service delivery for children with disabilities. This is supported by Marshall, Ralph and Palmer (2002) research on attitudes towards inclusion, which established that human resources is one of the key elements, together with administrative support, equipment and disability specific knowledge for mainstreaming efforts.

Bam (2012) elaborated that the limited number of staff available to implement sports related programmes created a significant barrier to inclusion, which the researcher also applies to the inclusion of visually impaired children in ECD programmes.

The importance of human resource (personnel) was also highlighted as critical for inclusion in the DSD Policy on Disability (DSD, 2008).
The researcher agrees with the recommendation in the policy that the personnel needed for effective service delivery need to be equipped with different skills and competencies, understanding and comprehension of the social model as it pertains to disability.

4.4. Conclusion

In presenting the findings, this chapter has illustrated the exclusion of children with visual impairment from ECD provisioning in KwaZulu-Natal, despite the government's inclusive policies and legislation.

The chapter also set out that the exclusion of visually impaired children is significantly influenced by the lack of awareness and support, inadequate specialist training, unavailability of services and limited resources. The limited ECD provisioning, as detailed above, results in the "othering" of visually impaired children. This gap in services is further compounded by the absence of a collaborated Departmental plan as well as a system of monitoring and evaluating.

In Chapter five, the researcher will present recommendations based on the issues raised in this chapter as well as revisit the research questions. The researcher will then conclude with proposals of areas for future studies.

Chapter Five
Conclusion and Recommendations

5.1 Introduction

The purpose of this chapter is to summarize key findings of the study and provide recommendations that emerged from the analysis of findings and discussion in Chapter four. Whilst the findings cannot be generalised to the remaining provinces outside of KwaZulu-Natal (the locale of the study), they will provide relevant stakeholders countrywide, with some material to evaluate available services and advocate accordingly.

The researcher will present a summary of findings from this study in Section 5.2. The researcher will discuss the limitations of this study in 5.3, followed by the significance of these findings in Section 5.4. Recommendations from this study will be presented in Section 5.5 and the research study will be concluded in Section 5.6.

This qualitative study sought to explore the availability of ECD programmes for children with visual impairment in KwaZulu-Natal. A key principle of Anti-Oppressive theory, which is used as a backdrop in this study, is the creation of "meaningful social relations for marginalized and excluded people within an anti-oppressive framework that addresses full and equal participation, access and inclusion at all levels" (Subrayen, 2011).

To this extent, this study demonstrated that although the South African government recognises ECD as one of its priority areas, and has adopted and developed inclusive legislation and policies accordingly; children with visual impairment remain excluded from the ECD provisioning in South Africa. This

exclusion translates into failure to promote full and equal participation as well as access and inclusion for children with visual impairment during the early childhood phase.

Since the literature revealed a gap in ECD services or programme for visually impaired children, the study attempted to determine the availability of ECD through exploring the experiences of social workers, parents of visually impaired children and foundation phase educators at a school for visually impaired children.

5.2. Summary of Findings

The findings of this study will be presented within the context of the existing literature as well as issues that can be considered for future study.

This discussion is guided by the three objectives of this study which were:

- To identify resources or programmes available in SA for children with visual impairment from birth to five years old.
- To understand the experiences / challenges faced by parents of blind and partially sighted children in accessing ECD programmes.
- To determine the views of educators on the availability and accessibility of ECD programmes as they affect school readiness of blind and partially sighted children.

5.2.1. Objective One

The first objective was aimed at determining what ECD resources or programmes were available in KZN for children with visual impairment. Responses from participants from all three sample groups confirmed the assumption that there were limited ECD programmes for children with visual impairment.

The data collected during the focus group discussion confirmed that there were only three schools in KZN that cater for children with visual impairments, with an entrance age of 5+. However data obtained from interviews with participants from sample group 3 (educators) and one participant from sample group 2 contradicted this position; in that one of the three schools in KZN did offer an ECD programme for children with visual impairments, starting as early as 3 years old.

Participants from all three sample groups were also aware of an ECD programme established by one of the two social work agencies, known as *Baumann House* and based in Umbilo, Durban, whilst some participants from sample group 1 one were aware of a privately owned ECD programme, known as *Bright Eyes* and based in Glenwood, Durban. Evidence therefore indicates that there are three known ECD programmes in KZN.

Given that according to Census 2001 (Statistics South Africa, 2005), the prevalence of sight impairment (32%) was the highest disability in South Africa, the researcher concludes that these 3 ECD programmes are insufficient to adequately meet the demand in KZN.

A further challenge is that all three programmes are located in central urban areas of KZN, thereby excluding visually impaired children from the outlying rural areas.

The researcher further concludes that this limitation negatively impacts children with visual impairment, especially since the crucial foundation phase (3 – 6 years) is over by the time they are admitted to school.

5.2.2. Objective Two

The second objective sought to understand the experiences and/or challenges faced by parents of children with visual impairments in accessing ECD programmes. The researcher utilised semi-structured interviews to determine how parents coped with meeting the ECD needs of their visually impaired child, exploring their experiences, challenges and support systems.

The parents of children with visual impairments reported a range of factors that served to exclude their children from accessing ECD programmes during the 3 – 6 year period. The parents of children with visual impairments reported a range of factors that served to exclude their children from accessing ECD programmes during the 3 – 6 year period. The researcher noted that although the initial criteria for the parents were to have a visually impaired child between the ages of 3 to 9 years, some of the parents that volunteered to participate in the interviews had children outside of this range. The researcher further noted that 4 out of the 8 parents that participated in this study had more than one child with a visual impairment. This was significant to the study in two ways: firstly as an indicator of the prevalence of visual impairment in KZN and secondly that data suggest a marked difference in the approach that parents adopt in meeting the educational needs of the second child, based on their experiences or challenges with their first child. The researcher deduces therefore that information and awareness is vital in determining how parents respond.

The findings of this study are that children with visual impairment are excluded by: insufficient support and information, service unavailability and limited resources, as detailed below.

5.2.2.1. Insufficient awareness and support

Data indicates that parents felt that there was very little or no support when their child was first diagnosed with a visual impairment. The researcher concludes that the lack of appropriate support and information on resources available disempowered parents from seeking appropriate advice and taking the necessary steps to meet the ECD needs of their child. Parents also reported that once diagnosed at the hospitals, they went home and continued to care for their visually impaired child with their limited knowledge and resources available at their disposal.

Evidence also indicates that parents only become aware of the resources available by chance, usually when the child reached school going age and then only, do parents actively seek assistance.

Unfortunately by this time, the fundamental foundation stage (3 – 6 years) has passed, as illustrated below by the response of one parent:

> *When I met the social worker at St Aidens, he was 7 years old and she referred me to the Blind Society. So he went to Arthur Blaxall School when he was 8 years old.*

Findings therefore suggest that early intervention would be attainable if there were sufficient information and parental support and guidance when visual impairment is first diagnosed. The researcher concludes that the absence of an efficient tracking and referral system in South Africa contributes to the lack of information and appropriate support for parents.

5.2.2.2. Service unavailability

As mentioned earlier in this chapter, all sample groups confirmed that there were limited ECD services available for children with visual impairment in KZN. Whilst data reflect that there are 3 known ECD programmes in KZN, not all participants from sample group 2 were aware of these programmes.

During the interviews with parents, the researcher explored the parents' approach to meeting the ECD needs of their visually impaired child as compared to their sighted child. Data reflected that parents enrolled their sighted child in local ECD programmes as early as 3 years old. In contrast, the visually impaired child remained at home.

The researcher noted that some parents seem to have resigned themselves to the fact that there are no ECD programmes for their visually impaired child within their communities, so they instead focus on applying to and securing a place at one of the three schools for the blind when the child reaches 6 or 7 years old. In the interim however the child is denied an opportunity to benefit from a conducive learning environment during the critical early developmental stages.

The location of the existing ECD programmes for visually impaired children in KZN further compounds the issue of unavailability of services. All three programmes are based in urban areas of KZN – Glenwood and Umbilo, thereby further limiting accessibility.

5.2.2.3. Limited resources

In keeping with this finding, data from all sample groups identified resources as a crucial component to the learning process of children with visual impairment, but that resources were unavailable, inaccessible or unaffordable. Participants

identified the challenges that were associated with these resources, which included financial restraints, cost and availability of transport, cost and supply of assistive devices and limited human resources. The researcher concludes from these findings that this limitation of resources as detailed in the previous chapter serves as barriers to accessibility.

The researcher therefore agrees with Kearney (2009) who maintains that there is a direct link between scarcity of resources and exclusion of children with disability.

5.2.3. Objective Three

The third and final objective was aimed at determining the views of educators on the availability and accessibility of ECD programmes as they affect school readiness of blind and partially sighted children**.** The researcher conducted interviews with foundation phase educators at two of the three schools in KZN that cater for children with visual impairments. The participants' responses reflected consistency with the other two sample groups regarding the insufficiency of ECD programmes in KZN.

The researcher also noted that the level of awareness amongst educators regarding the resources available outside of the school is limited, reaffirming the challenge raised in Chapter 4: working in silos and non-collaboration among key stakeholders.

Educators also recognised that the limited opportunities to participate in ECD programmes had a direct impact on the visually impaired child's level of preparedness and independence, as captured in the statement below:

Learners that come here don't know the basic skills, mobility, how to move…the earlier these services are available, the more apt the child is for the years to come. Simple things – trailing and walking, putting your hands up when walking. (Teacher 1)

Educators also reported that there is a difference between children in their class that participated in an ECD programme and those that did not, mainly in respect of social skills, confidence and independence skills. These findings therefore suggest that visually impaired children who attend an ECD programme also acquire basic essential skills from this social context that assist with the transition to the school environment. The researcher recognises this as a potential area for future study.

The researcher concludes that an ECD programme provides an enabling environment for visually impaired children to overcome limitations caused by the absence of sight.

All participants from sample group 3 agreed that the Government is primarily responsible for the education of visually impaired children and should therefore be more actively involved in addressing the gap that exists.

Data also suggested that there is a sense amongst participants that as educators of visually impaired children, they are doing as much as they can and it is the responsibility of others to do more. They wished that others would serve as advocates or lobby for improved ECD services for visually impaired children. This suggestion for others to take up cudgels on behalf of the visually impaired child indicates a certain level of tiredness / exhaustion at not taking this responsibility themselves, albeit this being the logical step to take, and further

complicates the “othering” process experienced by visually impaired children and parents.

The layers of discrimination experienced at the hands of oppression is herein evident as discussed by Dominelli (2002).

5.3. Limitations of the study

The limitations of the study are now presented in order that the section on recommendations that follows is carefully contextualised, considering same.

5.3.1. Scope of the study

The participants in this study were limited to only a sample of stakeholders in KZN. The views expressed therefore are not necessarily representative of stakeholders of other provinces and thus the findings would be limited to the specific province. Thus, it is possible that all findings and recommendations may not apply without adjustment to all. Context is important to consider, bearing in mind the diverse population groups in South African society. A further limitation with regard to scope is that the fact that parents were recruited from the two organizations, meant an obvious awareness of services. The study therefore does not reach parents of children with visual impairment that have not yet accessed services.

5.3.2. Sampling and sample size

The inaccessibility of one of the three schools for the blind and partially sighted in KZN was a direct limitation to the study that was already dependent on a small sample group (Gochros, 2008). Participation of this school in the study would have provided greater insight into the exclusion of visually impaired children in ECD programmes. The small sample size of all levels of this study further limits the generalizability of the findings.

5.3.3. The researcher as a tool

The researcher has 14 years' experience in the Disability sector and consequently has abundant anecdotal experience of some of the challenges and limitations. For this reason the process may be biased to a certain extent as a result of the researcher's own paradigms and work experiences impacting how questions were phrased, and responses to participants' answers received and analysed. The researcher sought to rationalize her thought process and clarify her own biases and beliefs through continuous discussion of the process with her supervisor to limit this possibility.

5.3.4. Financial constraints

This emanated as an unexplored area in the study that was discussed but without dedicated questions directed hereto. It was clearly an oversight and future research should take account of this omission (see recommendations for future study for more information on this).

5.4. Significance of Findings

This section covers the general importance of the findings, whilst the recommendations that follow here from, are more specific.

Although for the most part the results and conclusions in this study were logical and predictable even, the details offered by participants allowed for carefully considered recommendations to be logically and systematically constructed.

This study allowed the researcher to contribute specifically to two main aspects of services for children with visual impairment. The first contribution is related to policy and protocols, whilst the second contribution is related specifically to practice as outlined in chapter one, in the section on "value of the study".

5.4.1. Significance of study to policies and protocols.

The significance of this study to policy and protocols is to make the comments, arguments and findings that emerged available to the relevant governmental departments, with the primary object of promoting anti-oppression, social justice and basic human rights. ECD policies need to be revisited and protocols and resources put in place to ensure equal participation of all children, including children with visual impairment.

Policies also need to be revisited and amended to address the issue of non collaboration between relevant ECD stakeholders including governmental and non-governmental departments, and in addition protocols need to be designed and implemented to facilitate this collaboration. These policies should further address the need for screening, tracking and referral of children with visual impairment to alleviate the issue of delayed early interventions.

This study is further significant for influencing policies of Higher Education to expand their curriculum to include disability and diversity issues to promote an in-depth understanding of disability. This expansion should also extend to practical teaching experiences at schools for children with disabilities, to further enable the effective management of disability in the classroom.

The amendment of policies of Higher Education facilities to include disability and diversity issues, as proposed above, would also serve as means to widen the spectrum of disability awareness and thereby expand the opportunities of inclusion.

5.4.2 Significance of studies to practice.

Secondly the significance of this study is to make the findings that emerged available to the relevant role-players responsible for services to children with visual impairment to inform and shape practice. The researcher maintains that this would include the governmental departments of health, social development and education, as well as non governmental organizations – KZN Blind and Deaf Society and KZN Society for the Blind as well as ECD practitioners.

The findings of this study are therefore significant in informing the level of intervention that is required to promote the early childhood development of children with visual impairment. These strategies which will be detailed as recommendations include the following:

- Development of an easy-to-follow ECD protocol that would be available to new parents, hospital and clinic personnel, social workers and educators.
- Awareness campaigns and Information sessions to raise awareness of ECD services available for children with visual impairment.
- Parent support programmes

5.5. Recommendations

The recommendations that follow are based on the conclusions and the significant general findings outlined above.

5.5.1. Recommendations to Government

- The researcher recommends that the relevant government department undertake structural redress in order to adequately meet the ECD needs of children with visual impairment.

- The Departments of Social Development, Education and Health, in consultation with the NGO Disability sector should develop an ECD protocol for children with visual impairment as a guideline for parents of children with visual impairment as well those who work with them.

- The government departments should provide support to parents of visually impaired children at the time of diagnosis of visual impairment at hospitals and clinics. This support must include screenings to allow for early detection of disabilities, tracking and referrals to appropriate and specialised services.

- The findings of this study confirm the dire scarcity of ECD programmes in KZN. To this end, one of the key recommendations is the establishment of more ECD programmes that cater for children with visual impairment between the ages of 3 to 6 in the local communities of KZN, e.g. An ECD unit for children with disabilities within the mainstream schools in each community.

5.5.2. Recommendations to NGOs

- It is further recommended that NGOs establish a support group system where more experienced parents offer support and guidance to newer

parents. This forum can also be utilised to offer parents guidance on basic independence and mobility skills and alternate methods of promoting their child's ECD needs at home.

- Disability specific training should be conducted with all social work staff within the Department of Social Development to promote access to information and relevant early intervention.

- One of the key barriers to access identified through this study is the limited information and awareness of the resources that are available for children with visual impairment. It is therefore recommended that there is an increase in awareness campaigns and information sessions.

5.5.3. Recommendations in respect of ECD Programmes

- Disability specialists and ECD practitioners should be more actively involved in the planning and implementation of ECD programmes for children with visual impairment.

- Tertiary training for ECD practitioners and teachers should include disability specific training, including training relating to procurement and maintenance of specialised equipment. This training would serve to alleviate fears and misunderstandings about inclusion of children with visual impairment in ECD programmes.

- ECD practitioners and educators should play a more proactive role in advocating for the inclusion of visually impaired children in ECD programmes.

- There is a need for greater awareness programmes as well as the need for disability specific training as this should allay fears and misunderstandings currently held about inclusion of visually impaired children in ECD programmes.

5.5.4. Recommendations for future studies

• The link between financial constraints and access to ECD programmes was not actively researched and therefore identified as one of the limitations of this study. The researcher therefore recommends this as a potential area for future research.

• Given that the locale of this study was confined to KwaZulu-Natal, it is recommended that a similar study that covers all provinces is undertaken in order to strengthen advocacy efforts.

• A comparative study between visually impaired children who attend ECD programmes and those that do not would highlight the overall effectiveness of such programmes.

• It is further recommended that the design, implementation and evaluation of the proposed ECD protocol is undertaken as a future research study, ensuring the participation by all stakeholders, perhaps through government intervention.

5.5. Closing Comments

The researcher, like Ainscow, Booth and Dyson (2006) recognise that values are key components that shape policies on inclusion and exclusion, which in turn significantly influences school systems and policies.

Ainscow et al. (2006) identified a list of values which they found to be important for inclusive schools. These include equity, participation, community, compassion, respect for diversity, sustainability and entitlement, which the researcher found relevant for the provision of ECD programmes for children with visual impairment. Whilst these values may seem to exist in South African legislation and policies, the researcher deduces that, with the level of exclusion of visually impaired children from ECD provisioning that this study reveal, these values were clearly not evident in practice.

The aim of this research study was to determine the level of exclusion in the provisioning of ECD services for children with visual impairment through the experiences of parents, service providers and foundation phase educators at special schools.

The findings of this study clearly indicate that the ECD programmes in KZN are inadequate to meet the needs of children with visual impairment. Whilst the government has aligned its policies and legislation to global trends in the prioritization of ECD, the paucity of basic ECD services for children with visual impairment sadly resonates across a still developing 20-year-old democratic South Africa.

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UNIVERSITY OF KWAZULU-NATAL
INYUVESI YAKWAZULU-NATALI

21 November 2014

Mrs Belinda Naidoo (8831366)
School of Applied Human Sciences – Social Work
Howard College Campus

Dear Mrs Naidoo,

Protocol reference number: HSS/1118/013M
Project title: Access to Early Childhood Development (ECD) programmes for children with visual impairment in KwaZulu-Natal

Full Approval – Expedited Application

With regards to your response received on 19 November 2014 to our letter of 23 October 2014, the Humanities & Social Sciences Research Ethics Committee has considered the abovementioned application and the protocol have been granted **FULL APPROVAL.**

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number.

PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

The ethical clearance certificate is only valid for a period of 3 years from the date of issue. Thereafter Recertification must be applied for on an annual basis.

I take this opportunity of wishing you everything of the best with your study.

Yours faithfully

.....
Dr Shenuka Singh (Chair)

/ms

cc Supervisor: Professor M Kasiram
cc Academic Leader Research: Professor D McCracken
cc School Administrator: Ms Ausie Luthuli

BELINDA NAIDOO

P O BOX 1109 RESERVOIR HILLS, DURBAN, SOUTH AFRICA
Telephone: ([redacted]
E-Mail: bel_naidoo@yahoo.co.uk

Mr. Nad Ramsarup
Deputy Director
KZN Blind and Deaf Society
Email: academy@kznbds.org

Dear Mr. Nad Ramsarup

As you are aware, I am a qualified Social Worker, with 14 years of experience in the Blind sector. Until recently I was employed as a Director at KZN Natal Blind & Deaf Society. I am currently registered at the University of KwaZulu Natal to conduct a research thesis in fulfilment of the requirements towards the degree MSW - Masters in Social Work.

The proposed thesis is titled:
"Exploring the availability of Early Childhood Development (ECD) programmes for Blind children (3 – 6 years) in SA and the consequential impact on school readiness"

The objectives of the Research study:

- To explore what ECD programmes are available for blind children.
- To understand the challenges faced by parents of blind children in promoting their child's early development.
- To determine the impact on school readiness of blind children.

A vast body of research demonstrates that the first five years of a child's life is the most critical time for cognitive development, laying the foundation for intelligence and ability in adult life. The overarching purpose of this research, given that the first five years are so significant, is to determine whether the early childhood development needs of children with visual impairment are adequately catered for in South Africa. The significance of this study is that it will provide further insight to the gaps in service delivery to children with visual impairment and will contribute towards proposals to the relevant stakeholders to address such gaps.

Data for the purposes of this study will be collected on three levels:

1. Service providers – Organizations of and for the Blind.
2. Parents of children with visual impairment.
3. Foundation phase teachers at schools for the blind.

The support and participation of KZNBDS in this study is of utmost importance. In particular, your facilitation in terms of access to your Social Workers and +/- 10 parents of Blind children would enable me to collect data on level 2 as detailed above.

Details regarding the logistics of the interviews will be arranged once you confirm KZN Blind and Deaf Society's willingness to participate in this study.

I hope that my request would be considered favourably as it would definitely enhance our position as advocates for children with visual impairments. Please feel free to contact me should you require any further information regarding my research.

I look forward to hearing from you.

Yours Sincerely

Belinda Naidoo (Mrs)

BELINDA NAIDOO

P O BOX 1109 RESERVOIR HILLS, DURBAN, SOUTH AFRICA
Telephone: (031) [redacted]
E-Mail: bel_naidoo@yahoo.co.uk

Mr. Nad Ramsarup
Deputy Director
KZN Blind and Deaf Society
Email: academy@blindanddeafsocietykzn.org.za

Dear Mr. Nad Ramsarup

Thank you for your letter dated 6 June 2013 confirming the support of KZN Blind and Deaf Society and your willingness to participate in the research studies. If you recall, the research thesis is titled:
"Exploring the availability of Early Childhood Development (ECD) programmes for Blind children (3 – 6 years) in KZN and the consequential impact on school readiness"

I am now at the stage of my research to commence with the fieldwork, where data for the purposes of this study will be collected on three levels:

1. Service providers – Organizations of and for the Blind.
2. Parents of children with visual impairment.
3. Foundation phase teachers at schools for the blind.

Your facilitation in terms of access to the Social Workers / Social Auxiliary Workers and 5 – 8 parents of Blind children would enable me to collect data on level 1 and 2 as detailed above. A focus group will be facilitated with representatives of the Service Providers (Social Workers/ Auxiliary Social Workers / ECD personnel) in KZN.

The details of the focus group are as follows:
Date: 3 July 2014 Time: 10 am
Venue: Main Hall at Natal Settlers Memorial Home, 17 Hutchinson Road, Umbilo

It would be appreciated if you could confirm the number of persons that will be attending by Monday, 30 June 2014.

I hope that my request would be considered favourably as it would definitely enhance our position as advocates for children with visual impairments. Please feel free to contact me should you require any further information regarding my research.

I look forward to hearing from you.

Yours Sincerely

Belinda Naidoo (Mrs)

BELINDA NAIDOO

P O BOX 1109 RESERVOIR HILLS, DURBAN, SOUTH AFRICA
Telephone: [redacted]
E-Mail: bel_naidoo@yahoo.co.uk

Mr. Nad Ramsarup
Deputy Director
KZN Blind and Deaf Society
23 Ismail C. Meer Street
Durban
Email: academy@blindanddeafsocietykzn.org.za

Dear Mr. Nad Ramsarup

Thank you for your commitment on behalf of KZNBDS to participate in my research and for facilitating your Social Workers participation in the focus group on 3 July 2014.

As a reminder, my research is entitled: **"Exploring the availability of Early Childhood Development (ECD) programmes for Blind children (3 – 6 years) in SA and the consequential impact on school readiness"**

I am now at the stage to commence with the second level of data collection which entails interviews with parents of children with visual impairment between the age of 3 and 9. The main objective of this stage of the fieldwork is to understand the challenges faced by parents of blind children in promoting their child's early development.

It would therefore be appreciated if you could facilitate, through your social work department interviews with 8-10 parents of children with visual impairment for Thursday, 21st August 2014 from 9.00am. Please suggest an alternate date should this not suit you.

Please note that refreshments will be served and participants will be reimbursed up to R25 each, towards their cost of travel. Children are not expected to attend the interview session.

Please feel free to contact me should you require any further information regarding my research.

I look forward to hearing from you.

Yours Sincerely

Belinda Naidoo (Mrs)

BELINDA NAIDOO

P O BOX 1109 RESERVOIR HILLS, DURBAN, SOUTH AFRICA
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Mr J.R. Maharaj
Acting Principal
Arthur Blaxall School for the Blind
Royston Road
Mountain Rise
Pietermaritzburg
Email: blaxall@futurenet.co.za

Dear Jay Maharaj

It's been quite a while since we communicated, so I hope that my mail finds you healthy and well. Firstly, congratulations and I wish you all the best on your appointment as Acting Principal, definitely a well earned position.

As you are aware, I am a qualified Social Worker, with 14 years of experience in the Blind sector. Until recently I was employed as a Director at KZN Blind & Deaf Society. I am currently registered at the University of KwaZulu Natal to conduct a research thesis in fulfilment of the requirements towards the degree MSW - Masters in Social Work.

The proposed thesis is titled:
"Exploring the availability of Early Childhood Development (ECD) programmes for Blind children (3 – 6 years) in SA and the consequential impact on school readiness"

The objectives of the Research study:

- To explore what ECD programmes are available for blind children in SA.
- To understand the challenges faced by parents of blind children in promoting their child's early development.
- To determine the impact on school readiness of blind children.

A vast body of research demonstrates that the first five years of a child's life is the most critical time for cognitive development, laying the foundation for intelligence and ability in adult life. The overarching purpose of this research, given that the first five years are so significant, is to determine whether the early childhood development needs of children with visual impairment are adequately catered for in South Africa. The significance of this study is that it will provide further insight to the gaps in service delivery to children with visual impairment and will contribute towards proposals to the relevant stakeholders to address such gaps.

Data for the purposes of this study will be collected on three levels:

1. Service providers – Organizations of and for the Blind.
2. Parents of children with visual impairment.
3. Foundation phase teachers at schools for the blind.

The support and participation of schools for the Blind in KZN in this study is of utmost importance. In particular, I hereby request your permission to interview your foundation phase teachers which would enable me to collect data on level 3 as detailed above.

The details of the interviews are as follows:

Date: 22nd August 2014 (Friday)

Time: 9.30am – 10.30am

Venue: If permitted, the interviews will be held at your school for the teachers' convenience and time efficiency.

Please find attached a Consent form that needs to be completed by the participants.

I hope that my request would be considered favourably as it would definitely enhance our position as advocates for children with visual impairments. Please feel free to contact me should you require any further information regarding my research.

I look forward to hearing from you.

Yours Sincerely

Belinda Naidoo

Belinda Naidoo (Mrs)

Focus Group Thematic Guidelines

Research Participants: Representatives of Service Provider for Persons with Visual Impairments in South Africa during

Introduction: ***(5-10 minutes)***

The interviewer will discuss the purpose of the study with the interviewee, which is Exploring the availability of ECD programmes for children with visual impairments in KZN, SA.

Introduction: ***(5 minutes)***
The researcher will introduce themselves and provide the background and purpose of the research. Researcher will also provide guidelines for the process and inform participants of the recording.

Each participant will be invited to introduce themselves and the organization they represent.

Themes for Focus group discussions:

- Resources available for blind children between the age of 3 – 6 years old.
- Experiences in advising and referring families of blind children to ECD programmes.
- Difference in parental responses to ECD needs of blind children compared to sighted children.
- Barriers to including visually impaired children within the Education programmes?
- Initiatives or policies in existence to ensure the participation of visually impaired and blind children in any ECD programmes?
- Governments role to further promote inclusion of blind and visually impaired children in ECD programmes?

Conclusion: ***(5 minutes)***
This entails a debriefing session, allowing questions from the participants.
The researcher will ensure that the participants understand the purpose of the study and what will happen with the findings.
Thank participants for their time and participation.

Semi-structured Interview Schedule

Research Participants: Parents of Children with Visual Impairments between 3 – 8 years old

Introduction: ***(5-10 minutes)***

The interviewer will discuss the purpose of the study with the interviewee, which is Exploring the availability of ECD programmes for children with visual impairments in KZN, SA.

Preliminary Questions: ***(5 minutes)***
The interviewer will introduce themselves and ask the interviewee general questions about themselves to acquire background information.

1. Tell me about your family?

    Married / single parent; Number of children; birth order of child with visual impairment.

Conduct of interview / Main questions: (60 minutes)
2. Describe the circumstances around first learning of your child's visual loss?

    Age of child; Impact; support networks; services

3. How was it different to care for a blind child compared to a sighted child? How did you start teaching new concepts – numbers, words, animals, etc?

4. When did you first start looking for ECD programmes for your blind child? How is this different to your sighted children? What options or resources were available to you?

5. What can you tell me about the participation of visually impaired and blind children in the Early Childhood programmes?

6. What do you think are the barriers to including visually impaired children within the Education programmes?

7. How do you think blind and visually impaired children could be suitably accommodated in ECD programmes?

8. What could the Department of Education do to further promote inclusion of blind and visually impaired children in their programmes?

Conclusion: ***(5 minutes)***
This entails a debriefing session, asking the participant if there is anything else they would like to add and asking are they happy with the interview. The interviewer can answer any questions in this section and ensure the participant understands the purpose of the study and what will happen with the findings.

Thank you for your time and participation. *(*all times are approximate, to be used as a guideline, as some sections will not take the allocated times.)*

Semi-Structured Interview Schedule for

Foundation-phase Teachers at Schools for the Blind

Background Information:

1. Name of Research Participant: _____ (optional)

2. Role: _____ Grade: _____

3. Total Years of Experience: _____ 4. Years of Experience in Special Ed: _____

5. Name of School: _____

6. Address: _____

7. Established by: _____ 8. Established in: _____

9. Is your School:

State owned	
NGO	
Private	

10. Total School Population: _____ 11. No. of Children in Foundation phase: _____

12. Criteria for admission:

Age:

2+	
3+	
4+	
5+	

Nature of Disability:

Blind	
Partially Sighted (PS)	
Visual Impairment with additional disabilities	

Appendix 8

1. What is your understanding of the availability of ECD programmes for children with visual impairments in KZN?

2. How do you think this affects parental experiences in promoting their child's early development?

3. In your experience, how many of the children in your class attended an ECD programme prior to admission to school? Why do you think this so?

4. How would you describe the difference in school readiness between blind children and sighted children during their first year at school?

5. How adequately do you think the Government is meeting the Early Childhood development needs of Children with visual impairment?

6. What could parents of visually impaired children do to ensure that they can access ECD programmes?

7. How do you see your role in facilitating the inclusion of visually impaired children into ECD programmes?

Informed Consent Form (Service Provider)

Consent to participate in research

My name is Belinda Naidoo and I am a post graduate student at the University of KwaZulu Natal completing my Masters degree in Social Work. My supervisor is Prof M. Kasiram. Her telephone number is [redacted].

I am conducting research on the availability of Early Childhood Development (ECD) programmes for children with visual impairment in KwaZulu Natal. This focus group is designed to explore awareness of and availability of ECD provisioning for children with visual impairment in South Africa from the perspective of Service Providers.

Please note that you will not receive any money for participating in the research.
I would like to audio tape the interviews and take down notes at certain points of the group. All the recordings from the interviews will be locked in a safe place and will be shredded and destroyed after five years.

Your name will be kept confidential. Only the university supervisors and the researcher will have access to the interview material. Once all the data are collected and analyzed for this project, the key findings will be shared through a fact sheet that will be distributed through SA National Council for the Blind.

Your participation in this research is totally voluntary and you can withdraw at any time without any negative consequences.

Please confirm with a √ that:
You have willingly agreed to participate in this focus group. ☐
You are a representative of Service Provider for persons with visual impairment. ☐
You consent to this focus group being audio-recorded. ☐

I, _____ consent to participate in the research project.

_____ _____
Signature Date

If you wish to obtain information on your rights as a participant, please contact Ms. Phumelele Ximba, Research Office, UKZN on [redacted]

Copy of Informed Consent Form (Parent)

Consent to participate in research
My name is Belinda Naidoo and I am a post graduate student at the University of Kwa-Zulu Natal completing my Masters degree in Social Work. My supervisor is Prof M. Kasiram. Her telephone number is [redacted].

My research topic is: **Access to Early Childhood Development (ECD) programmes for children with visual impairment in KwaZulu-Natal.**

You have been chosen because you have a child with visual impairment that is between 3 and 8 years old. You are not being singled out and will not be stigmatised / discriminated against at any time during this research or thereafter as a consequence of your participation.

The interview will last approximately 30 minutes.
Zulu translation will be available during the interview if necessary.
If you become stressed or uncomfortable, it is okay to stop the interview and the researcher can refer you for counselling to the Agency social worker.
You will not receive any money for participating in the research.

I would like to record the interview as well as make notes during the interview.
All the recordings from the interviews will be locked in a safe place and will be shredded and destroyed after five years.
Your names and the names of your child will be kept confidential. Only the university supervisors and the researcher will have access to the interview material. Once all the data are collected and analyzed for this project, the key findings will be shared through a fact sheet that will be distributed through KZN Blind and Deaf Society.

Your participation in this research is totally voluntary and you can withdraw at any time without negative consequences. This will not affect the services that you receive from the KZN Blind and Deaf Society.

Please confirm with a √ that:
You have willingly agreed to participate in this focus group. ☐
You consent to this interview being audio-recorded. ☐

I, _____ (Full name) consent to participate in the research project.

_____ _____
Signature Date

If you wish to obtain information on your rights as a participant, please contact Ms. Phumelele Ximba, Research Office, UKZN on [redacted]

Informed Consent Form (Educators)

My name is Belinda Naidoo and I am a post graduate student at the University of Kwa-Zulu Natal, completing my Masters degree in Social Work. My contact details are [redacted] or bel_naidoo@yahoo,co.uk.
My supervisor is Prof. M. Kasiram. Her telephone number is [redacted]

My research topic is: **Access to Early Childhood Development (ECD) programmes for children with visual impairment in KwaZulu Natal.**

You have been invited to participate in this research as a Foundation phase Educator at a school for the Blind and as such would have valuable information on the early childhood development needs of and services for children with visual impairment.

The interview will be scheduled at a time and venue that is convenient for you and will last approximately one hour.

Please note that you will not receive any money for participating in the research.

I would like to record the interview as well as make notes during the interview. All the recordings from the interview will be locked in a safe place and will be shredded / destroyed after five years.
Your name will be kept confidential. Only the university supervisors and the researcher will have access to the interview material.
Once all the data are collected and analyzed for this project, the key findings will be shared through a fact sheet that will be distributed through your school.

You participation in this research is totally voluntary and you can withdraw at any time.

Please confirm with a √ that:
You have willingly agreed to participate in this research. ☐
You are a foundation phase educator for children with visual impairment. ☐
You consent to the interview group being audio-recorded. ☐

I, _____ (full name) hereby consent to participate in the research project.

_____ _____
Signature Date

If you wish to obtain information on your rights as a participant, please contact Ms. Phumelele Ximba, Research Office, UKZN on [redacted]